



Conversation Framework: Discussing New Amyloid-Targeting Therapies for Alzheimer's Disease with Patients and Care Partners

This guide helps health care professionals navigate conversations about FDA-approved amyloid-targeting therapies with patients and their care partners. The guide is based on recommendations from the Alzheimer's Association's[®] Clinical Meaningfulness Workgroup for patients with early-stage Alzheimer's disease (AD), including mild cognitive impairment (MCI) or mild dementia due to Alzheimer's.

Read the **[full recommendations](#)** in *Alzheimer's & Dementia[®]: The Journal of the Alzheimer's Association* or view the summary available on **[ALZPro](#)**.



Step 1: Conduct Initial Assessment and Introduction

Before discussing treatment specifics, assess patient eligibility and introduce the concept of amyloid-targeting therapy.

Confirm Foundational Eligibility

- **Verify Diagnosis:** Ensure patient has a diagnosis of MCI or mild dementia due to Alzheimer's.
- **Check Cognitive Status:** Confirm impairment is mild (e.g., Mini-Mental State Exam [MMSE] score >22).
- **Evaluate Safety Factors:** Review anticoagulant use, neuroimaging findings (e.g., white matter disease, history of stroke), APOE-*e4* status and other relevant medical conditions that may affect treatment safety.
- **Determine Need for Amyloid Testing:** Identify whether patient needs a PET scan, lumbar puncture or blood test to confirm amyloid pathology.

Introduce the Treatment Concept

- **Explain the Mechanism:** Use non-technical language such as, "There's a protein building up in your brain, called amyloid, that is implicated in memory and thinking problems We now have new treatments that reduce brain amyloid and in some people, can slow the progression of the disease."
- **Clarify Treatment Limitations:** Emphasize that these treatments are not a cure and are specifically designed for early-stage Alzheimer's.

For more information on how to stage AD, review **[Revised Criteria for Diagnosis and Staging of Alzheimer's Disease](#)**.



Step 2: Discuss Potential Benefits

Frame the benefits in tangible, patient-centered terms rather than abstract statistics.

Describe “Time Saved” Concept

- **Quantify the Benefit:** Explain that clinical trials showed a slowing of disease progression by four to six months on average, over an 18-month treatment period.
- **Personalize the Impact:** Connect this benefit to the patient’s life with examples like, “This could mean more time enjoying hobbies, managing finances or living independently.”



Step 3: Review Potential Risks

Explain amyloid-related imaging abnormalities (ARIA) and the importance of APOE genotyping for risk assessment.

Discuss ARIA

- **Discuss Infusion-Related Reactions:** Noting they are typically mild and manageable with medical intervention.
- **Define ARIA in Simple Terms:** Describe ARIA as, “This treatment can cause side effects in the brain, which we can see on an MRI. The most common are ARIA-edema, which is temporary fluid buildup, and ARIA-hemorrhage, which involves small spots of bleeding.”
- **Review Possible Symptoms:** List key symptoms to watch for, including headache, confusion, dizziness and vision changes.
- **Emphasize Monitoring Requirements:** Explain the need for regular MRI scans to detect ARIA early.

Address Variability in Response

- **Explain Group vs. Individual Results:** Clarify that trial results represent averages across many patients, and individual responses can vary.
- **Set Realistic Expectations:** Emphasize that response to treatment varies—some individuals may experience significant benefit, others minimal improvement, and some may not respond at all.

Explain APOE Genotyping

- **Introduce the Genetic Component:** Describe how the APOE gene affects both Alzheimer’s risk and treatment safety.
- **Discuss Risk Stratification:** Explain that having one or two copies of the APOE-e4 allele increases ARIA risk, making genetic testing important for personalized risk assessment.
- **Discuss Family Implications:** Note that genetic results may have implications for blood relatives, and offer resources and support for discussing genetic information with family.

Review Serious Risk Potential

- **Acknowledge Rare Complications:** State clearly that while uncommon, serious adverse events can lead to hospitalization, disability, and in rare cases, death.
- **Provide Written Information:** Ensure the patient receives the Medication Guide.



Step 4: Address the Practical Considerations

Discuss the logistical, financial and time commitments required for treatment.

Review Time Requirements

- **Outline Treatment Schedule:** Explain the frequency of infusions and monitoring appointments.
- **Discuss Travel Considerations:** Address potential challenges with transportation to infusion sites.
- **Consider Care Partner Involvement:** Acknowledge the time commitment required from care partners.

Address Financial Aspects

- **Discuss Insurance Coverage:** Advise patients to contact their insurance provider about coverage details.
- **Identify Potential Costs:** Mention potential out-of-pocket expenses for treatment, testing and monitoring.

Explain Registry Requirements

- **Describe Mandatory Enrollment:** Inform Medicare patients about the requirement to enroll in either the Medicare registry or **ALZ-NET**.
- **Explain Purpose:** Clarify that these registries collect information about treatment effectiveness and side effects to improve future care.
- **Review Data Collection:** Mention that participation involves sharing treatment outcomes and safety information.

Consider Treatment Duration

- **Acknowledge Uncertainties:** Explain that the optimal length of treatment is not yet definitively established.
- **Plan for Ongoing Assessment:** Note that treatment continuation will be evaluated periodically.



Step 5: Facilitate Decision Making

Guide the patient and care partner toward an informed decision about treatment.

Summarize Key Points

- **Review Benefits and Risks:** Briefly recap the potential benefits, risks and commitments discussed.
- **Check Understanding:** Ask the patient and care partner to summarize their understanding of the key points.

Explore Patient Perspectives

- **Ask About Priorities:** Use open-ended questions such as, “Having heard all this, what are your biggest hopes for this treatment?” and “What are your biggest concerns?”
- **Assess Practical Considerations:** Inquire about their comfort with the time and travel commitments.

Establish Next Steps

- **Define Action Plan:** Clearly state what happens next based on the discussion:
 - **If Proceeding:** Explain what tests or referrals will happen.
 - **If Not Proceeding:** Explain what **alternative management strategies** you may collaboratively consider.

 ALZHEIMER'S ASSOCIATION | **ALZPro**

For additional information and professional resources, visit alz.org/ALZPro.