



**World Wide Alzheimer's Disease Neuroimaging Initiative  
Teleconference Minutes**

**April 8 / April 7**

**1:00 am Eastern/ 12:00 am Central/ 10:00 pm Pacific**

**Attendees:**

Giovanni Frisoni	Richard Margolin
Salvador Guinjoan	Colin Masters
Takeshi Iwatsubo	Chris Rowe
Seong Yoon Kim	Mike Weiner

**I. Roll Call and Welcome** Jim Hendrix welcomed the group to the meeting and reviewed the agenda.

**II. Progress Updates**

**a) Japanese ADNI - Takeshi Iwatsubo**

Takeshi provided a summary of J-ADNI. Beginning in August 2008 and continuing until March 2014, J-ADNI1 enrolled 538 cases over 38 sites and collected cognitive data from ~3000 visits, ~2400 MRI images, ~1400 FDG PET, and ~600 amyloid PET images. In addition, 340 CSF samples (196 at baseline) were collected. Currently these data are almost ready for internal sharing, almost one year later than originally planned. They are preparing to publish the data. The project has been delayed due to the false allegations made against the project prompting an investigation that fully exonerated Takeshi and J-ADNI of any wrong doing. Despite the findings of this independent investigation, Takeshi may be forced to step down from his leadership role in J-ADNI. A new PI will be named soon who will work to secure funding from the government. The timeline for the open access of J-ADNI data through NBDC has not been finalized, but it is hoped to be completed during the summer or early fall of 2015. International data sharing is not limited through NBDC and other databases (eg LONI) could also be considered. Despite the change in leadership of J-ADNI, Takeshi fully expects to attend AAIC in Washington, D.C. this summer.

All the WW-ADNI PI's on the call expressed their strong support for Takeshi and his excellent leadership of J-ADNI and his behavior which has been beyond reproach. Further, everyone expressed deep regret that despite his excellent work he will be forced to step step down.

**b) NA-ADNI - Michael Weiner**

ADNI-2 is drawing to a close but has been extended for 1 additional year with no additional cost and will come to an end in July 2016. One change to the final year of ADNI-2 is the addition of Tau PET using the Avid ligand, [<sup>18</sup>F]-AV-1451.

Much of the effort with NA-ADNI is focused of the efforts to submit a grant application for ADNI-3 due in September 2015. The planning for ADNI-3 is on-going with the leaders of the various cores and the PPSB (Private Partner Scientific Board) which also provides financial support. The main goal of ADNI-3 will be to continue the work of the previous ADNI's to validate biomarkers for clinical trials. The subjects

will include subjects followed in ADNI-2 and newly recruited subjects. The focus will be on the earlier stages of the disease with 40% of subjects in the early / prodromal stage, 40% with MCI and 20% with Alzheimer's dementia. Longitudinal Tau PET will be a new addition to ADNI-3 along with the use of on-line tools provided by Cogstate and the Brain Health Registry.

Several technical issues are under discussion for ADNI-3. For Tau PET, the selection of the PET ligand is being discussed. It appears that [<sup>18</sup>F]-AV-1451 is currently the most likely candidate as the most data is available on the ligand. However, there are known issues such as poor kinetics and non-specific binding. Some pharma companies have also expressed concern over the use of the Avid / Lilly ligand and whether they will be able to gain access to this ligand for their own clinical trials. It is hoped that this issue can be worked out. ADNI-3 will also need to identify sites with facilities able to perform Tau PET. The PET core is evaluating other PET ligands and exploring ways to be flexible in the future and add new Tau ligands as they become available. ADNI-3 is committed to selecting the best available Tau ligand.

The selection of a platform for CSF analysis was also discussed. For the past 10 years ADNI has used the Luminex immunoassay for the analysis of A $\beta$ , T-Tau and P-Tau. However, in recent years new platforms have become available. The Biomarkers Core has been evaluating these new systems and is currently leaning toward the new Roche Diagnostics automated platform. The cobas Elecsys assay system from Roche is fully automated with a very high throughput and very low variability. The Roche platform costs >\$100K but they have already donated one of the systems to U. Penn so it is being evaluated by the Biomarkers Core. Tobias Bittner is the Roche contact to ADNI. Mass spectrometry has also been evaluated but the throughput is low only able to analyze one sample at a time and currently it can only be used for A $\beta$ .

DoD ADNI is currently enrolling veterans. To date 150 veterans have been enrolled and a total enrollment goal of 400.

A comment was made that enthusiasm from funding agencies around the world to fund longitudinal studies such as ADNI appears to be waning. Mike agreed to share the arguments, rationale and specific aims that NA-ADNI is using in their grant applications with any ADNI around the globe. Simple send a note to Mike and he will send a copy.

The group also discussed the recent Biogen Phase 1b trial results. While there was general excitement about the result, Mike expressed concern that ADNI may start to face increasing competition for trial subjects from treatment trials. On the subject of clinical trial recruitment, there will be an open meeting on Saturday, July 18 in Washington, D.C. prior to the start of AAIC. The meeting will mainly be focused on discussion rather than presentations and will include topics such as TrialMatch, the Brain Health Registry and EPAD.

**b) AIBL/Australia ADNI - Chris Rowe**

AIBL has recently completed the downloading of 4.5 years of data from the project into LONI for open access by the AD research community. This is a significant amount of data and was a major effort by the AIBL team. The availability of this data needs to be publicized. Art Togo should send an announcement. Alz Forum should be informed and this information should be included in the ISTAART newsletter. Jim

Hendrix will work with Chris and Colon to get this announcement in the ISTAART newsletter. Funding remains a challenge for the project. The core funding has run out and the project is operating on supplemental funding. The hope is that government funding will be made available shortly to allow the project to progress to the next phase.

**c) European ADNI - Giovanni Frisoni**

Enrollment in eADNI is going well and all target goals are being met. Funding is currently focused on an S2 renewal and some other European opportunities. Unfortunately, longitudinal studies, such as ADNI, are not as strongly supported as they have in the past. PharmaCog hippocampal volume data was presented and demonstrated that better accuracy was observed with in the presubiculum vs the whole hippocampus. Expected diffusion differences in 55 and 90 MCI A $\beta$ + and A $\beta$ - subjects were observed.

EPAD was briefly described. It is a large public / private partnership led by Craig Ritchie. The primary goal is to build a clinical trial ready cohort of healthy and MCI subjects. The industry partners advocated for the inclusion of the MCI subjects. It is expected that 25,000 people will be screened which will lead to a cohort of 8,000 subjects. Currently, there is no funding to support non-Europeans to travel to EPAD meetings however, global input and collaboration is desired.

**d) Argentina ADNI - Salvador Guinjoan & Gustavo Sevlever**

Recruitment has achieved 56 subjects evaluated at baseline divided between healthy, early MCI, late MCI and AD dementia. Imaging and CSF data has been obtained at baseline and most of the 1 year follow-up has been completed. Some subjects have completed a 30 month follow up. Future efforts include Argentina DIAN which will include 40 participants. A study on AD biomarkers in Downs Syndrome is also planned for 2016 and will include 10 participants. An Arg-ADNI socioeconomic study has been proposed. An Arg-ADNI-2 study has been proposed that will expand the study to at least 8 sites and 180 participants.

**e) Korean ADNI - Seong Yoon Kim**

Korean ADNI is still experiencing some recruiting issues due to new National guidelines for clinical trials. There have also been some logistical issues with the imaging sites. However, the first subjects are expected to be recruited in May which is a 6 month delay. The project plans to make all the data open access which is in line with the project goals and mandated by the government.

**III. Discussion: WW-ADNI Face-To-Face Meeting at AAIC; July 17- Jim Hendrix**

The next Face-to-Face meeting is scheduled for July 17 in Washington, D.C. All PI's are requested to comment on the meeting format of past face-to-face meetings and to suggest new topics and other changes if desired.