





ALZHEIMER'S DEMENTIA EARLY DIAGNOSIS, CHARACTERIZATION, PROGNOSIS AND TREATMENT DECISION VIA A SOFTWARE-AS-MEDICAL DEVICE WITH AN ARTIFICIAL INTELLIGENT AGENT

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INTRODUCTION

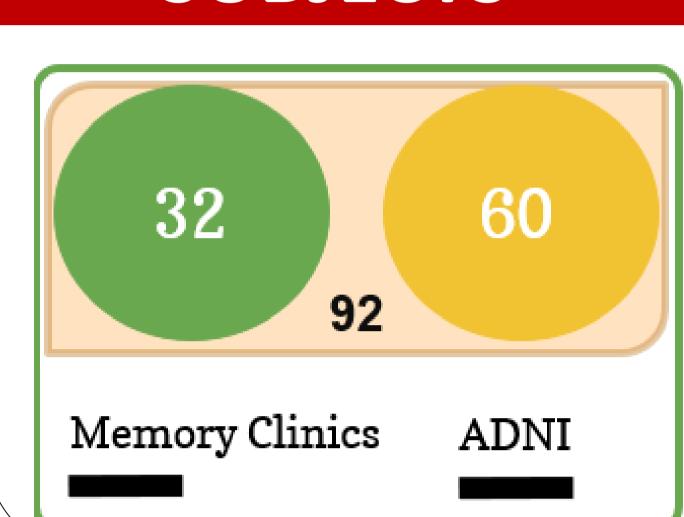
- TRACE4AD (DeepTrace Technologies s.r.l, Italy) is a machine learning-based software-as-medical device able to predict the conversion to Alzheimer's disease (AD) dementia of subjects at risk within 24-months exploiting automatic processing of T1-weighted MPRAGE brain MRI study and neuropsychological tests [1] [2].
- TRACE4AD provides a report with the predicted individual risk of conversion to AD dementia, specific cognitive deficits, and suggestions supporting neurologists in diagnosis and characterization, prognosis, and decision-making.

AIM

To test TRACE4AD in the clinical setting in its ability, at baseline, to:

- a) predict amnestic Mild Cognitive Impairment (MCI) conversion to AD dementia within 24-months;
- b) characterize cognitive deficits;
- c) support neurologists' decision-making.

SUBJECTS



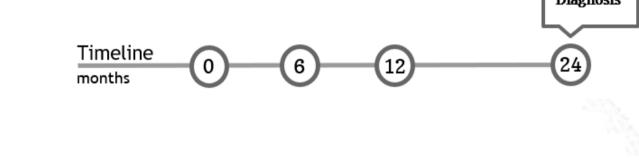
- Patients were recruited from 2 Italian centers
- Demographic's: Mean age 73.12 ± 7.6 46% female

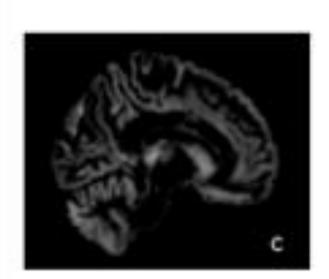
REFERENCE STANDARD

- the neurologist-s clinical diagnosis at 24-months
- the neuropsychological assessment at the baseline
- the agreement with the neuro exam and intervention decision time and type defined by neurologists at the baseline.

METHODS

Structural MRI T1 weighted







65 scores/subscores from 7 neuropsychological tests

GM

1 segmented VOI x Voxel-based features

Feature extraction: kPLS / PCA Feature selection: FDR

SUMMARY

be

TRACE4AD extracted the gray matter map from MPRAGE and used it (combined with cognitive measures) to make inferences.

used

neurologists in characterizing the

diagnosis, prognosis, decision, and

timing of intervention. TRACE4AD

requires training for its use in clinical

CONCLUSION:

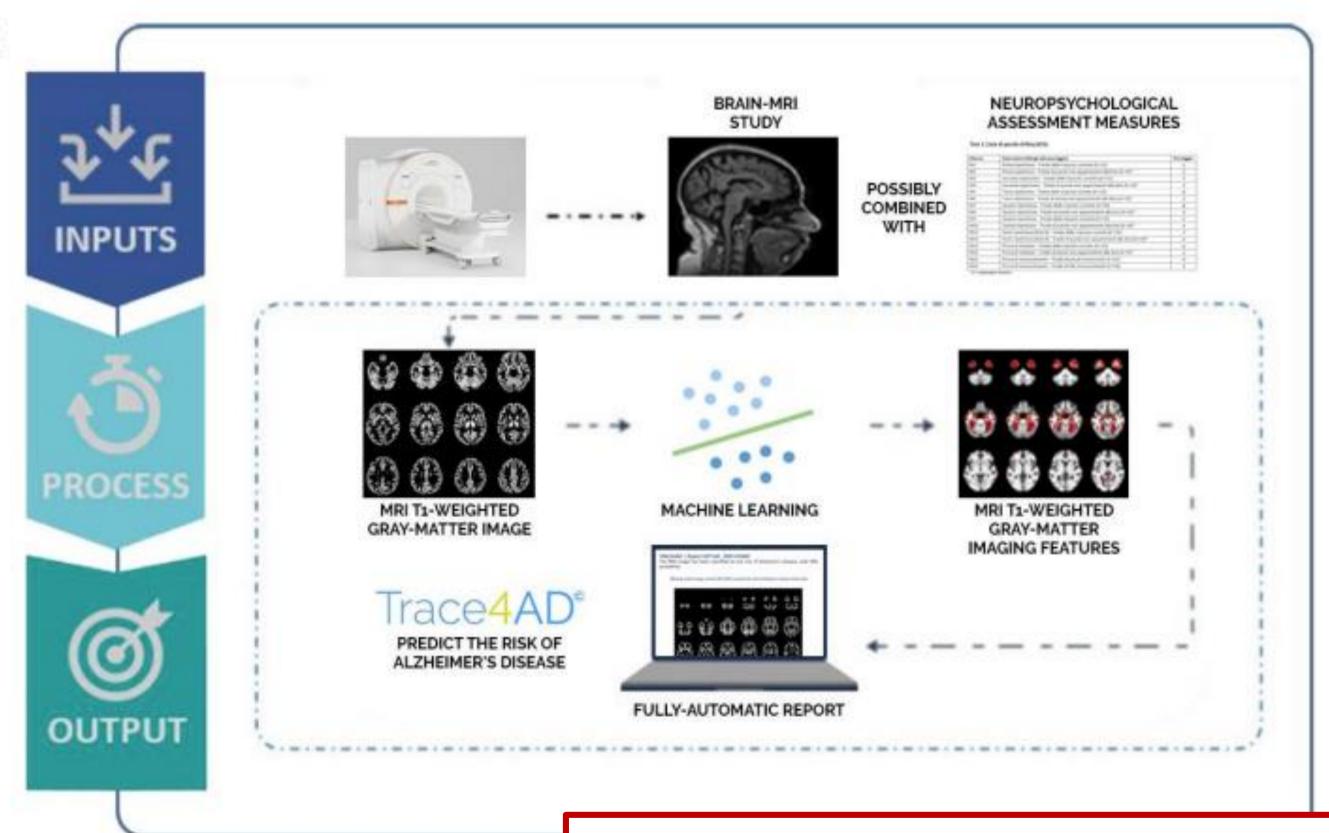
TRACE4AD is promising, safe, and

to

PRELIMINARY RESULTS

predicted conversion/non-TRACE4AD accurately conversion to AD dementia in

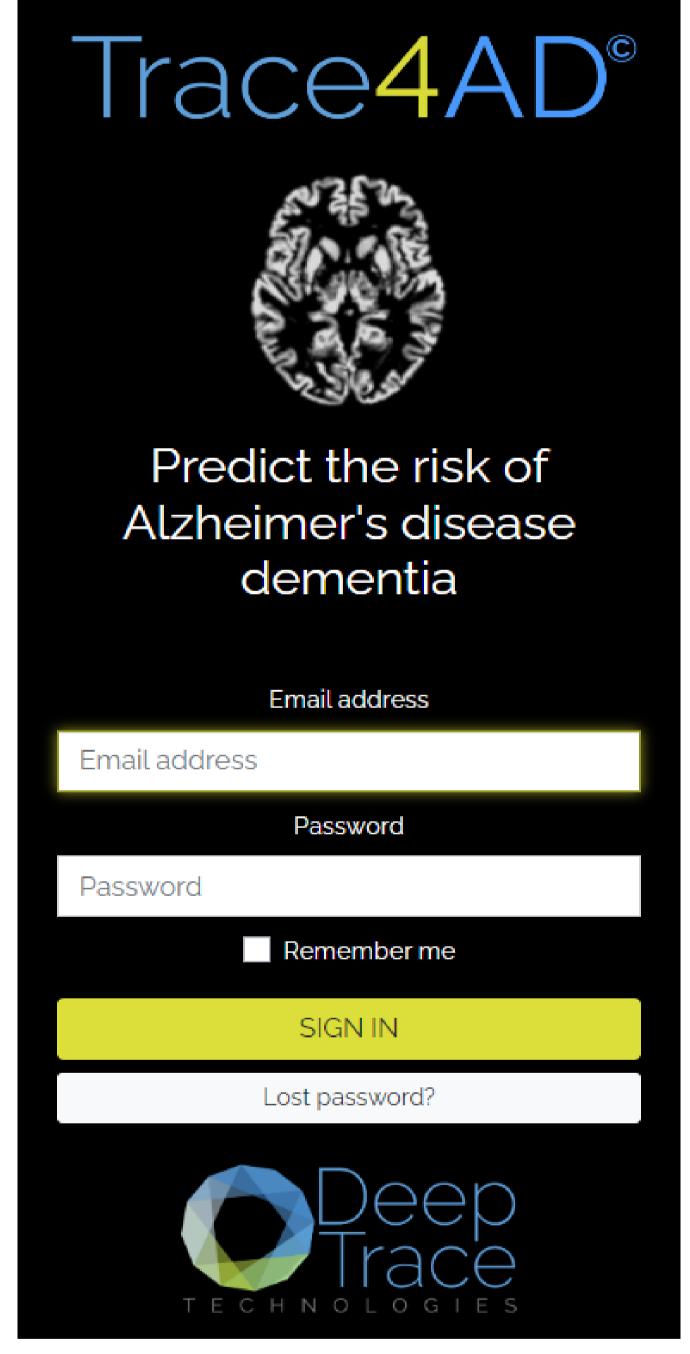
- 93.3% of patients based on the MRI study alone
- 96.6% based on MRI and cognitive measures.
- Cognitive deficits characterized by TRACE4AD were found in agreement with the neuropsychologists assessment for all patients except 1 who presented with major depression.



TRACE4AD | Report DTT-AD_PCDI004.01MNP The T1-weighted MRI data and neuropsychological assessment have been classified by TRACE4AD as high risk for Alzheimer's disease dementia within 24 months. In addition to the typical memory impairment, significant difficulties in visuoconstructive functions are detected.

 Disagreement between the neurologist's prediction and the up visit was scheduled for those patients.

tool at baseline was in only 2 patients, defined with no risk and high risk of dementia conversion, respectively. A follow-



 TRACE4AD supported neurologists' prompt 88.2% decision in patients at baseline: 6 patients with cognitive complaints, defined with normal cognition by the tool, had interventions; 9 patients subtle cognitive deficits, recommended for treatment by the tool, tailored had intervention.

effective in supporting neurologists in

the clinical practice of MCI across different centers.

support

References:

Al

practice.

[1] Salvatore, C., Cerasa, A., & Castiglioni, I. (2018). MRI characterizes the progressive course of AD and predicts conversion to Alzheimer's dementia 24 months before probable diagnosis. Frontiers in aging neuroscience, 10, 135.

[2] Battista, P., Salvatore, C., Berlingeri, M., Cerasa, A., & Castiglioni, I. (2020). Artificial intelligence and neuropsychological measures: The case of Alzheimer's disease. Neuroscience & Biobehavioral Reviews, 114, 211-228.

[3] Jack C R, Bernstein M A, Fox N C, Thompson P, Alexander G, Harvey D, et al. (2008) The Alzheimer's disease neuroimaging initiative (ADNI): MRI methods. J. Magn. Reson. Imaging

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