

**Online Workshop for Asian medical students and young doctors**

**“Is it possible to treat Alzheimer's Disease?”**

**host by J-MICA, Japan**



J-MICA, International Activities Promotion Committee

## **TERMS OF REFERENCE**

### **A. Organizer**

J-MICA, International Activities Promotion Committee, Japan

### **B. Title**

Online Workshop for Asian medical students and young doctors

“Is it possible to treat Alzheimer's Disease?”

### **C. Background**

Dementia, particularly, Alzheimer disease is a big issue in each Asian country. Recently amyloid antibody clinical trials have showed an efficacy on the development of Alzheimer's disease. In addition, multifactorial Intervention Trial for Dementia Prevention (Finger study) showed the effectiveness to prevent dementia. However, these therapies just began and how they will be used in Asian countries is still under consideration.

### **D. Aim of this workshop**

The purpose of this international online workshop is to provide medical students and young doctors professional programs with knowledge and discuss how to treat Alzheimer's disease in each Asian country.

### **E. Output**

Participants can understand the new therapies for Alzheimer's disease and

know how to implement these therapies in society.

#### **F. Speaker**

- **Prof. Christopher Chen**

(Director of the Memory Aging and Cognition Centre at the National University of Singapore)

He has conducted numerous collaborative research projects in the Asia-Pacific region. Currently, he has established a regional network for innovative clinical trials on dementia diseases in Asia and a novel amyloid antibody drug trial. He will introduce anti-amyloid treatment for Alzheimer's disease.

- **Prof. Takashi Sakurai**

(National Center for Geriatrics and Gerontology, Japan)

He will talk about J-MINT study to examine whether multiple interventions such as lifestyle-related disease management, exercise and nutritional guidance, and brain training can be used simultaneously to control dementia in elderly people at risk of dementia. The J-MINT study is the Japanese version of the FINGER study, a national project aimed at future social implementation.

#### **G. Targeted Audience**

Medical students from undergraduate and post graduate programs and young doctors in Asian countries.

#### **H. Workshop Implementation**

This international online workshop will be held on:

Date : Thursday, October 3<sup>rd</sup>

2024

Time : 6:30 p.m. (Japan time), 5:30 p.m. (Singapore time),  
5:30 p.m. (Philippines time), 4:30 p.m. (Jakarta time),  
4:30 p.m. (Thailand time)

Location : ZOOM Meeting platform

### I. Event Rundown

Time Allocation	Activity	Person in Charge
	Opening	Professor Toshiki Mizuno
06.30 – 07.10 PM	Lecture 1	Professor of Christopher Chen
07.10 – 07.30 PM	Lecture 2	Professor of Takashi Sakurai
07.30 – 8.00 PM	Discussion	Moderator: Professor Toshiki Mizuno, Kasai Takashi
	Closing	Professor Ruli Ashida

#### Discussion part

Participants were divided into 3 groups and discuss three topics;

##### 1. Understanding Alzheimer's disease

It is better to diagnose Alzheimer's disease in the early stage if a patient is treated by

Anti A $\beta$  antibody (Alzheimer's Dementia 2024 doi: 10.1002/alz.14114.). However,

pathological process of Alzheimer's disease including relationship between Amyloid and tau is still unclear.

#### Discussion points

- ✧ Is it possible to diagnose Alzheimer in the early stage? If it is possible, what biomarker is need to diagnose? PET, Spinal fluid test, blood test
- ✧ If we treat a patient with early stage of Alzheimer's disease, Can  $A\beta$  Antibody therapy modify disease course?
- ✧ Is it possible to escape from Amyloid related imaging abnormality (ARIA)?

#### 2. Cost performance of new therapy -benefit & disadvantage-

Eisai decided LEQEMBI™ U.S. Launch Pricing at \$26,500 per Year (200mg vial is \$254.81 and the 500mg vial is \$637.02). Actual annualized pricing may vary by patient.

The yearly per-patient value of LEQEMBI from a societal perspective was quantified at approximately \$37,600, which equals to approximately \$135,000 in lifetime value per

patient to the U.S. society. ([News Release : 2023 | Eisai Co., Ltd.](#)) However, the

European Medicines Agency recommended that Leqembi not be authorized across the

EU, saying that the drug's impact on slowing cognitive decline did not outweigh its

serious side effects. ([Leqembi | European Medicines Agency \(EMA\) \(europa.eu\)](#))

Finger study and J-MINT study showed the effectiveness of multiple intervention to

protect dementia. To implement these therapies in society, many human resources and education are needed. ([WW-FINGERS | Alzheimer's Association](#))

#### Discussion points

- ✧ How about the cost performance of LEQEMBI?
- ✧ Is it possible to escape from Amyloid related imaging abnormality?
- ✧ Is it possible to implement multiple intervention for dementia?

### 3. Asian approaches to dementia and its treatment

Approach to dementia may be different in each country. At first, I'd like to ask students how demented patient is treated in each country. Then, I'd like to hear how your country would or would not incorporate new treatments.

Navigators: C. Chen, T. Sakurai, T. Mizuno, T Kasai

Tutors are recruited from students and young doctors from many institutions.