



New Diagnostic Insights & Challenges of Treatment

By Sanjeev Vaishnavi, MD, PhD



Recent advances in technology allow for earlier and earlier diagnosis of Alzheimer's disease (AD) pathology. Unfortunately, the treatment options for patients with AD have not kept pace with diagnostic advances, and repeated failures of clinical trials for new treatment modalities have occurred. Because of the significant updates in clinical criteria, we thought it was time to dedicate an issue to current trends and challenges in the management of patients with AD. We are grateful for the generous assistance of a diverse group of experts to summarize their work and the future challenges of managing the growing epidemic.

Drs. Harkins and Karlawish's article provides insight on the disclosure of amyloid status to individuals without cognitive impairments, which will become more common as early biomarkers continue to be developed. The ramifications of such disclosure as well as the greater ethical implications involved are discussed in context of the new framework for preclinical AD.

The stigma of a diagnosis of AD continues to be a barrier to effective care and treatment of patients. Drs. Stiles and Karlawish provide a framework to approach and minimize this stigma as we discuss this clinical diagnosis with patients and their caregivers.

The role of the neurologist in helping the patient and their family live as well as possible with AD dementia is the topic of Drs. Potts, Agarwal, and Duncan's piece. We increasingly understand that the diagnosis of dementia needs a multifactorial approach and great compassion for caregivers and patients.

Current diagnosis and management of Alzheimer's dementia is summarized by Drs. Patira and Vaishnavi. It is a brief primer on the current state of clinical diagnosis, including use of new biomarkers, and treatment, both symptomatic and supportive.

The role of sleep and circadian rhythm abnormalities in AD remains poorly explored. Dr. Musiek provides a summary of current research linking sleep abnormalities to the pathophysiology of AD.

We hope this issue provides increased insight into clinical care of patients with AD and how the field continues to evolve. We look forward to continued improvements in both assessing patients' needs and developing approaches to care for this devastating disease. ■

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