CAMD Participates in International Alzheimer’s Conference

The Alzheimer’s Association International Conference was held July 13-19, 2012 in Vancouver, BC and brought together 4,300 researchers and scientists. The conference is the largest global meeting of its kind and draws researchers from around the world to report on and to discuss groundbreaking research and information on the causes, diagnosis, treatments, and prevention of AD and related neurological disorders.

CAMD Conference Highlights

- C-Path’s CAMD team presented three posters on the progress and application of quantitative drug disease trial models of AD. For more information on these presentations, [click here](#).

- Key CAMD industry members and foundation partners actively participated in the conference including Dr Peng Yu (Eli Lilly) who presented, “Prediction of disease progression in mild cognitive impairment from vMRI and concordance with cerebrospinal fluid biomarkers.” This presentation was held in the session entitled, “Neuroimaging MCI: Imaging biomarkers of AD Pathology,” and highlighted CAMD’s efforts in AD biomarkers.

- CAMD’s Executive Director, Dr Stephenson, presented at Global Biomarkers Standardization Consortium (GBSC). Her presentation summarized the progress of CAMD’s efforts in qualification of CSF biomarkers for patient enrichment in clinical trials of first-diagnosed AD patients. The presentation has already been cited in the online Alzheimer’s Research newsletter. [Click here for the full article](#).

- Many conference presentations focused on novel biomarkers for identification of at-risk patients and on those biomarkers that will accelerate drug discovery and personalized medicine. Candidate biomarkers being actively pursued by CAMD colleagues include volumetric MRI for measuring hippocampal atrophy and biochemical measurements of pathogenic species Amyloidß42 and tau in cerebrospinal fluid.

- Additional meeting highlights included focus on therapies to target asymptomatic patients at risk for developing AD, plasma based biomarkers, cognitive outcome measures for MCI, novel genes that confer risk to developing AD, and focus on tau-based therapeutic target strategies. Significant attention was also given to the importance of sharing data and the value of public/private partnerships.
Lastly, media attention was drawn to a few new drug candidates showing promising results in Phase II clinical development (IvIg, alpha7 agonist). These candidates are still early in development and additional data will be required to define if such agents will approved for broad clinical use.

**Other information of note that was discussed**

AD is a very heterogeneous disease with several subtypes that differ according to pathological, clinical, and biochemical criteria. As a result, the definition and categorization of the types of patients being enrolled in clinical trials, as well as identification of patients early in the disease, are critical success factors for optimizing drug development. The conference attracted investigators worldwide who study how biomarkers can help to define patients and monitor disease progression and response to novel treatments.

Modeling and simulation tools enable industry to apply integrated sources of data to develop clinical trial designs for patients that hold the most promise for success. Of note, CAMD’s efforts to develop the first quantitative drug disease trial model for mild/moderate Alzheimer’s disease is paving the way for applying similar approaches in earlier phases of AD. It’s one thing if a bad drug fails but another thing altogether if a good drug fails for the wrong reasons. The goal of modeling is to ensure that new drugs don’t fail due to flawed trial designs. By applying modeling tools, the AD field can increases the chances of success in future trials.