Adapting Alzheimer's Disease Modifying Treatment Criteria to Accommodate Adults with Down Syndrome

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... *and* National Task Group on Intellectual Disabilities and Dementia Practices

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Lumind IDSC Down Syndrome Foundation

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What are the key issues?

With the emergence of the novel anti-amyloid medications, what are the concerns related to adults with neuroatypical conditions (including DS-AD)?

- **Equity in clinical trials**
  - Absence of any participation in extant clinical trials and thus assurances of efficacy of the medications and safety for their use
- **Prescribing criteria issues**
  - Current language in drug formularies does not provide inclusion for adults with neuroatypical condition
- **Dx for eligibility**
  - Inadequate inclusion of specialty tests for dx of AD in adults with neuroatypical conditions or recognition of potential variations in testing criteria

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Why equity for Down syndrome?

Adults with Down syndrome are at high risk of Alzheimer's disease (and dx'd with DS-AD)

New AD disease modifying treatments have potential to help adults with Down syndrome who meet eligibility criteria

Prescribing criteria either deny access or neglect to acknowledge access options for adults with Down syndrome

Once safety determined there should be no barriers to equal access

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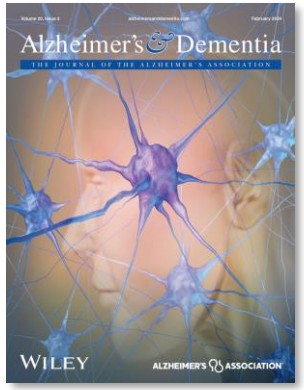
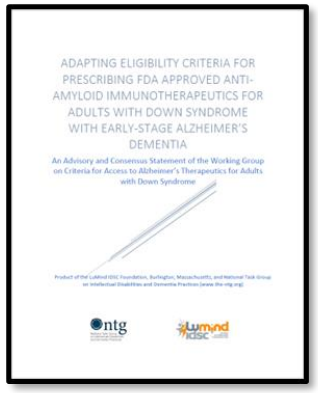
Adapting prescribing criteria for amyloid-targeted antibodies for adults with Down syndrome



https://doi.org/10.1002/alz.13778



Patients with DS/ID are **implicitly not covered** by the prior authorization criteria for AD DMTs, potentially depriving them of access to a beneficial treatment

An international **expert panel convened** and recommended modified prescriber criteria, ensuring their suitability for DS/ID patients once the drugs are deemed safe for use with this group

Many patients with DS/ID show **younger age dementia onset** and **floor effects on AD diagnostic assessments**, compared to adults with sporadic AD.

Recommendations to extant prescribing criteria include:

- **lowering the age** of eligibility (<50)
- **using alternative measures** for diagnosis and neurocognitive decline relevant to DS/ID (specialized DS/ID instruments)
- **broadening latitude** in presentation due to lifelong cognitive limitations (recognizing behavioral variants)
- **raising clinician proficiencies** in diagnosing dementia in adults with DS/ID (continuing education)

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https://lumindidsc.org/wp-content/uploads/2023/06/Working-Group-DS-AD-Eligibility-Criteria-May-30-2023.pdf

What did we do to advocate for equity?

- Identified barriers to equitable access in language of state drug formularies
- Organized a response by convening an expert panel to identify equivalencies to existing language
- Worked with advocacy organizations, governmental authorities, and the medical sphere to alert them to this problem
- Arrived at consensus on equivalencies for determination of presence of Alzheimer's dementia, appropriate tests, and functional impairments
- Distributed report and published findings in professional journal

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Where AD-DMTs are available

- Academab **(Aduhelm™)** had limited use in the USA and was withdrawn from use by Biogen in January 2024.
- Lecanemab (**Leqembi™)** has been approved
  - In the **USA** for general use and its payments are covered for all enrollees in Medicare (CMS, 2023)
  - In **Japan**, approved for adults enrolled in its National Health Insurance program (Igarashi et al., 2023; Japan Times, 2023)
  - In **China**, approved by the National Medical Products Administration (Biogen, 2023)

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  - In **China**, approved by the National Medical Products Administration (Biogen, 2023)
- Approval pending in numerous countries and regions
  - **In the EU**, under review by the European Medicines Agency (BioArtic, 2023)
  - **In Canada**, under review by Health Canada (Watt et al., 2023)
  - **In Great Britain**, lecanemab has been designated for the Innovative Licensing and Access Pathway (ILAP), which aims to reduce the time to market for innovative medicines (Biogen, 2023)
- Donanemab (Sims et al., 2023) is pending approval in 2024 in the USA and in other countries (McKie, 2023)
- **In the UK**, the Medicines & Healthcare Products Regulatory Agency (MHRA) will decide if lecanemab and donanemab are safe and effective, then the National Institute for Health and Care Excellence (NICE) will decide whether the cost for the medications will be covered.

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Outcomes

- Tracking language in prescribing criteria to assure inclusion of Down syndrome
- Promoting equity in upcoming clinical trials
- Alerts to Pharm re: ensuring no barriers are inherent in clinical materials distributed to prescribers
- Preparing constituencies (DS/ID families, associations, etc.) to better understand potential value of access to AD DMTs
- Providing materials to countries where AD DMTs are not yet approved so equity can be on table and DS/ID organizations can advocate for inclusion

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Last words

- Advocate for inclusion of adults with intellectual disability/Down syndrome in clinical trials
- Assure investment in trials that produce outcomes for adults with Down syndrome
- Work proactively to have policies of national bodies approving or overseeing use of the AD DMTs to be neutral or not exclusionary
- Aid professional organizations mount education of prescribers on assessing/diagnosing adequately AD in adults with neuroatypical conditions, including Down syndrome/intellectual disability
- Provide counsel to families and persons affected as to the risk/benefits of seeking out AD DMTs

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