

The new intravenous drug for Alzheimer's disease: A closer look

What you and your family should know about lecanemab (Leqembi), a medication for Alzheimer's disease.





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Learn more about Alzheimer's disease

Discuss the disease with your healthcare professional

- Ask what to expect over the course of the condition.
- Talk about treatment options.
- Make plans for future care as Alzheimer's disease worsens.

Speaking with loved ones and documenting wishes can help patients with dementia get the care they want and can help healthcare professionals guide treatment discussions and reduce stress.

Caregiver resources

Find local supports to help with coping and caregiver stress.

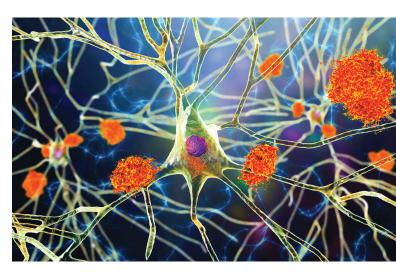
- Caregiver Center:
 qrco.de/Alz_caregiving
- Caregiver Health: qrco.de/Alz_caregiver_health
- 'Stress-busting' for caregivers: qrco.de/Stressbusting
- **Powerful tools for caregivers:** powerfultoolsforcaregivers.org

Alzheimer's disease affects 6.5 million Americans.

Older drugs like donepezil (Aricept, generics), and memantine (Namenda, generics) slow the rate of mental decline slightly and temporarily, but don't stop or reverse the process.

What is amyloid?

Amyloid is a protein that has been found in the brain of people with Alzheimer's disease; many but not all scientists believe that it is the main cause of this condition. **Amyloid creates debris in and around nerve cells** that can affect how the cells work. Some researchers believe that reducing amyloid can slow the progress of the disease.



An artist's rendition of nerve cells with amyloid (orange clumps).

What do anti-amyloid drugs do?

These medications are antibodies produced in the lab that are **designed to attack and destroy amyloid in the brain.**

Several of these products have been developed, but until recently none of them were shown to have an effect on mental functioning in patients with Alzheimer's disease. The first to do so is lecanemab (Leqembi). In a large clinical trial, it slightly slowed the rate of decline in mental functioning by about half a point on an 18-point scale, over a year and a half.

What do we know about Leqembi?

- Leqembi is an antibody that **targets** amyloid in the brain.
- The drug must be given by an hour-long intravenous (IV) infusion every two weeks for as long as it is taken.
- A trial of patients with mild cognitive impairment or mild Alzheimer's disease found patients taking Leqembi had a **slightly slower rate** of memory decline compared to people given a placebo infusion.
- Leqembi does not stop or reverse Alzheimer's disease; it just slows the rate of deterioration by a small amount.
- It has not been shown to work in people with moderate or advanced Alzheimer's disease.



What are the risks of Leqembi?

- Nearly 1 in 4 patients reported problems caused by the IV infusion (such as flushing, headache, or chills).
- Swelling or bleeding in the brain was seen on brain scans (MRIs) in over a quarter of patients given Leqembi.
- More research is needed on the risk of stroke in patients taking Leqembi, especially in people taking blood-thinning medications.

What testing is required with Leqembi?

Specialized brain scans (positron emission tomography) or a lumbar puncture (spinal tap) are needed before Leqembi is started. MRI brain scans are also needed before treatment and several times a year to monitor for brain swelling or bleeding.

What are the limits of Leqembi?

Some experts question whether the small slowing of the rate of memory loss in people taking Leqembi is large enough to be noticed by patients or caregivers.

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These are general recommendations only; specific clinical decisions should be made by the treating clinician based on an individual patient's clinical condition.

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