

Keynote 5: Integration of Biomarkers and Quantitative Modeling – Analytical Validation and Standardization of Fluid Biomarkers

October 27, 2020



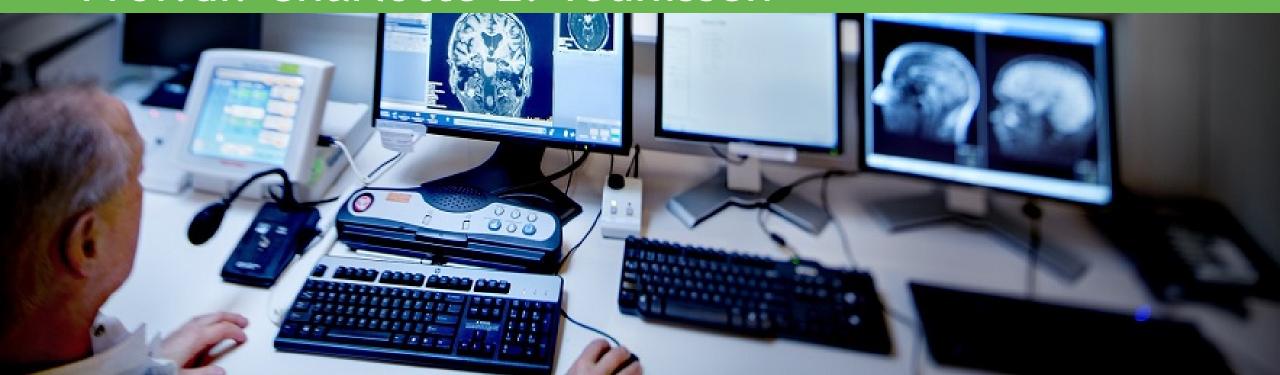
Charlotte Teunissen, Professor VU University Medical Center





Integration of Biomarkers and Quantitative Modeling Analytical Validation and Standardization of Fluid Biomarkers

Prof.dr. Charlotte E. Teunissen





Long preclinical phase in dementias







No symptoms

Clinical disease



Biomarkers needed in dementia trials

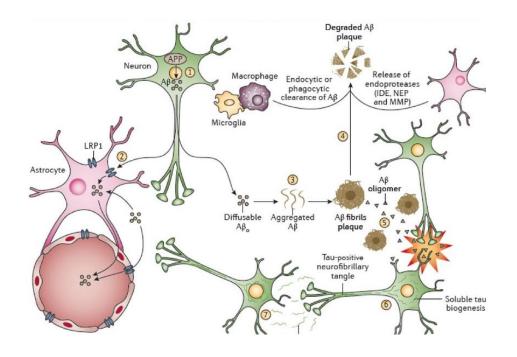
- ✓ Inclusion of the right patients in preclinical phase
- √ Target engagement
- ✓ Side effect monitoring
- ✓Outcome measures in preclinical phase
 - ✓ Phase 2: Biomarker endpoints
 - ✓ Phase 3: Surrogacy. To replace clinical outcomes



Biomarker portfolio for trials

Inclusion/outcomes:

Core pathologies: CSF abeta, (p)Tau Plasma abeta, (p)Tau **GFAP**



(Side) effects:

Axonal damage Neurofilament light

Outcome measures (CSF):

Synaptic dysfunction: Neurogranin, SNAP-25, NPTX2, VAMP-2

Microglia damage:

Trem-2, YKL-40



Inclusion: prescreening in preclinical phase

Plasma amyloid beta ratio to predict progression in early stages of AD





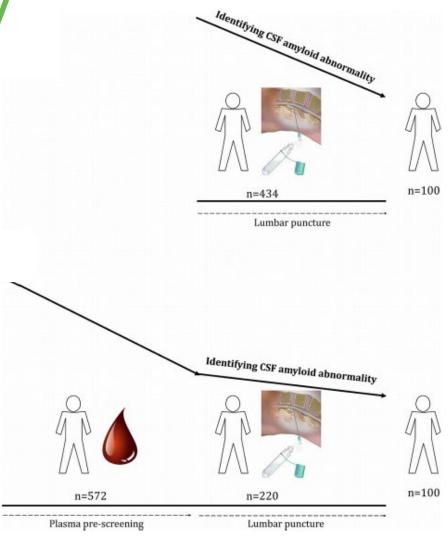






Prescreening in early stage AD for trial inclusion:

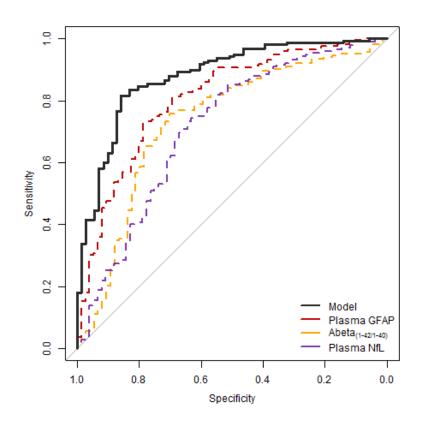
From 434 to 220 lumbar punctures





Inclusion

Multiplexing markers better predicts PET positivity



Multiplex analysis:

➤ AUC = 88%

➤ Sensitivity = 82%, specificity = 86%

Abeta_(1-42/1-40): AUC=73%

GFAP: AUC=81%

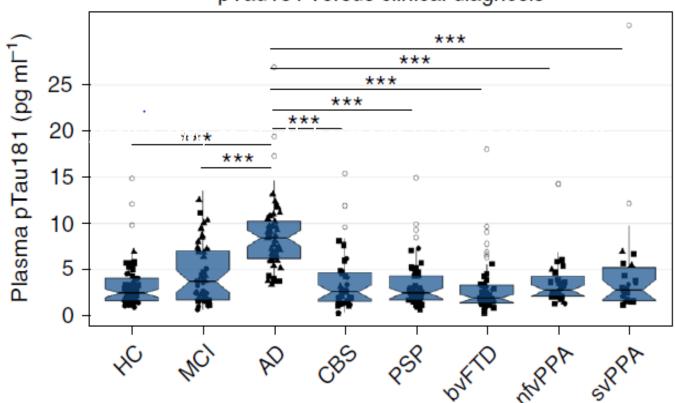
NfL: AUC=71%

Inclusion



Plasma pTau181: Specifically increased in AD

pTau181 versus clinical diagnosis





Outcome measures:

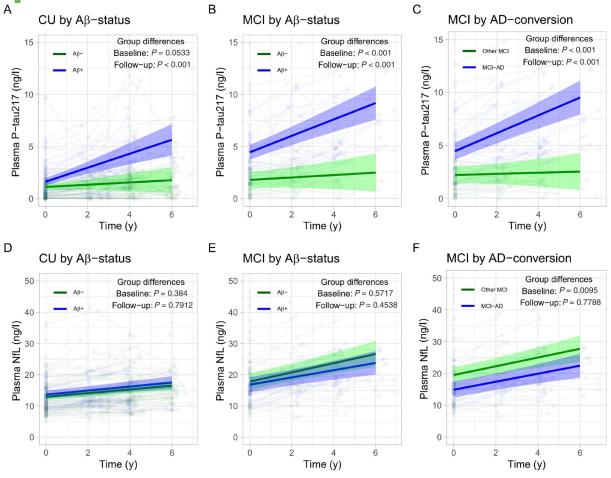


Longitudinal plasma p-tau217 and NfL across

the AD stages

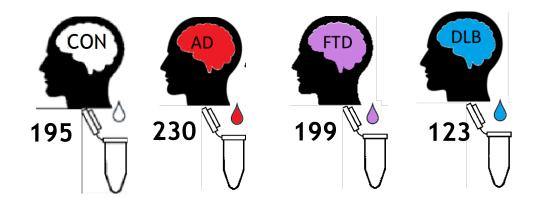
Detect reduction in pTau slope

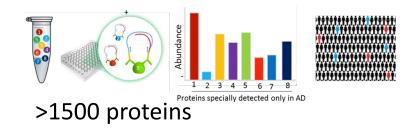
N=109 per arm to for CU N=71 per arm for MCI

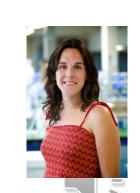




Proteomics analyses to identify novel inclusion and outcome measures





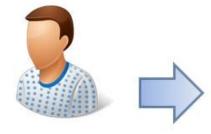


(b)PRIDE project

Standardisation



Targetting (pre-)analytical variation



<u>Patient</u>

- Diet
- Exercise
- Diurnal rhythm
- Clinical history documentation
- Sample labeling



Laboratory processing

- Transport time and temperature
- Time delay to spinning
- Spinning conditions
- Time to freezing
- Freezing temperature
- Duration of freezing
- Type of lab plastics

Assay performance

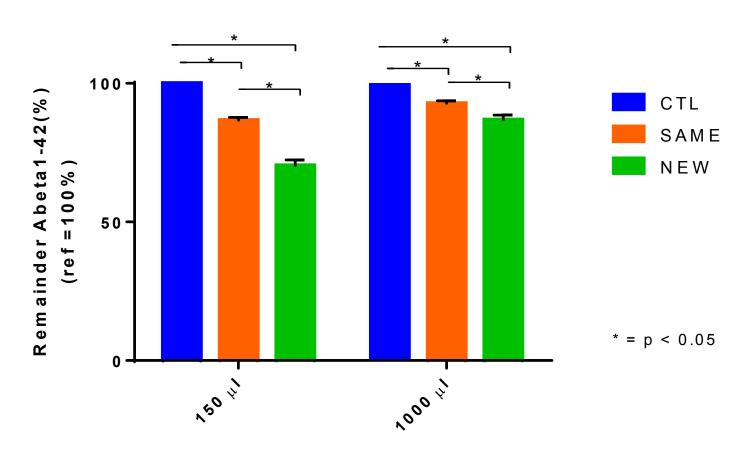
- Buffer composition
- Machine settings
- Compliance with the protocol
- Others, depending on type of assay
- Lack of certified reference material

Willemse and Teunissen,

Book chapter in: CSF in clinical practise, ed. Deisenhammer, Teunissen, Tumani Sellebjerg



AB42 absorbed by pipette tip?





Consensus pre-analytical protocols for CSF



Critical issues in CSF analysis:

- Pre-analytic: Amyloid absorption to plastics
- Analytic: Variation between platforms:
 - √ reference materials/methods
 - ✓ automation

Central analysis of biomarkers



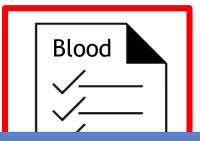
Consensus pre-analytical protocol for

blood is lacking



Critical issues in CSF analysis:

- Amyloid absorption to plastics
- Variation between platforms:
 - √ reference materials/methods
 - ✓ automation



Critical issues in blood analysis:

- ✓ Collection tube?
- ✓ Time to centrifugation?
- ✓ Freezing/thawing?

Systematic evaluation of common pre-analytics

Project design





1) Survey among cohorts and diagnostic companies + expert opinion enquiry



2) Selection most relevant pre-analytical variables



3) Establish a biorepository of *mistreated* sample sets



4) Define pre-analytical effects on Alzheimer's blood-based biomarkers



5) Generate SOP



Summary

Body fluid biomarkers are a requirement in clinical trials in dementias - wide portfolio available

Detailed evaluation of trajectories needed to establish use as outcome measures

Good pre-analytical protocols CSF in place - blood under development

Analysis can easily be done centrally

You never work alone.....























































