## BUILDING BRIDGES TO BRING ANTIAMYLOID MONOCLONAL ANTIBODIES TO ELIGIBLE PATIENTS WITH ALZHEIMER'S DISEASE

## **Radiology Checklist for Antiamyloid Monoclonal Antibodies**

- Perform amyloid positron emission tomography (PET) to confirm amyloid burden for a diagnosis of early Alzheimer's disease
  - 3 US Food and Drug Administration (FDA)-approved tracers available to confirm amyloid burden

Tracer	Dosage, MBq	Waiting Period, min	Scan Period, min	<b>Display Color Scale</b>
Florbetapir (Amyvid®)	370	30-50	10	Grayscale (or inverse grayscale)
Flutemetamol (Vizamyl™)	185	60-120	10-20	Rainbow color scale
Florbetaben (NeuraCeq®)	300	45-130	20	Grayscale (or inverse grayscale)

 Ensure availability in imaging schedule for regular magnetic resonance imaging (MRI) monitoring as required at baseline and within first few months of antiamyloid monoclonal antibody (mAb) administration

- Lecanemab (Leqembi®) requires MRIs prior to 5th, 7th, and 14th doses
- Donanemab (Kisunla®) requires MRIs prior to the 2nd, 3rd, 4th, and 7th doses
- Allow unscheduled MRIs to detect amyloid-related imaging abnormalities (ARIA) based on new symptoms
- ☑ Be familiar with definitions of radiographic ARIA

ARIA Type	Mild	Moderate	Severe
ARIA-edema (E)	FLAIR hyperintensity confined to sulcus and/or cortex/subcortex white matter in 1 location <5 cm	FLAIR hyperintensity 5 to 10 cm in single greatest dimension, or more than 1 site of involvement, each measuring <10 cm	FLAIR hyperintensity >10 cm with associated gyral swelling and sulcal effacement. 1 or more separate/independent sites of involvement may be noted
ARIA-hemorrhage (H) (microhemorrhage)	≤4 new incident microhemorrhages	5 to 9 new incident microhemorrhages	10 or more new incident microhemorrhages
ARIA-H (superficial siderosis)	1 focal area of superficial siderosis	2 focal areas of superficial siderosis	>2 areas of superficial siderosis

- ☑ Be prepared to activate protocols to manage severe radiologic ARIA
- ☑ Upload MRIs and notes to electronic medical records
- Communicate with patient's neurologist if radiographic ARIA is detected so they can determine appropriate next steps for antiamyloid mAb dosing