PREDICTORS TO LONG TERM TREATMENT RESPONSE TO GALANTAMINE

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Introduction: Limited data are available on predictors of outcomes in patients with AD

Aim: To identify predictors of long term treatment response to Galantamine in patients with Alzheimer's disease (AD).

Methods: Pooled analyses included 6 randomized placebo-controlled (PLC) trials in patients with mild to moderate AD receiving galantamine 16-24 mg/day, and 12 open-label extensions with an overall follow > 36 months. Different baseline covariates (e.g. sex, age, BMI, baseline ADAS-cog/11) and 6 months evaluations of ADAS-Cog/11, DAD, NPI and CIBIC were investigated to see the impact on long-term changes in ADAScog using a mixed effects model similar to Stern's model.

Results: A mixed effects model shows change in ADAS-cog/11 and CIBIC at 6 months are highly predictive for the further decline of the patient: a worsening of 4 points in ADAS-cog/11 at 6 months predicts a further decline in ADAS similar to the decline for untreated subjects as estimated by Stern's equation. Effects of described baseline covariates were either insignificant or too small to predict non-response in ADAS at 6 months.

Conclusions: Change in ADAS-cog/11 at 6 months is an excellent predictor for the further evolution of a patient with AD and treatment with Galantamine. Subjects benefit from long-term galantamine compared to no-treatment if they are not a rapid decliner (i.e. worsening of > 4 ADAS-cog/11 points at 6 months). There is no prognostic factor to not treat patients.