DRUG DEVELOPMENT

POSTER PRESENTATION

HUMAN

Solanezumab Treatment for Alzheimer disease : Meta analysis for Non EXPEDITION Trials

AMEER FADHIL ABBAS AL WSSAWI Maham Rana³ Mahmoud Gamal⁴ Mahmoud Moustafa Ahmed Amin⁴ Rawan Mohammad Ibrahim Nawas⁵

Ali Saad Al-Shammary² | Sahar Imtiaz³ |

¹Al-Qadisiyah university / College Of Iraq , بابل Medicine

²Baghdad medical city, Baghdad, Iraq

³Dow Medical College, Dow, Pakistan

⁴Faculty of medicine - Fayoum University, Fayoum, Egypt

⁵Quds university, Quds, Palestine

Correspondence

AMEER FADHIL ABBAS AL WSSAWI, Al-Qadisiyah university / College Of Medicine, .Iraq بابل Email: md.ameerfa@gmail.com

Abstract

Background: Solanezumab, a promising treatment for Alzheimer's disease, has captured the attention of the medical community. This monoclonal antibody is designed to target and clear beta-amyloid plaques, a hallmark feature of Alzheimer's, from the brain. While initial clinical trials showed mixed results, ongoing research is exploring its potential to slow cognitive decline and improve the lives of those affected by this devastating neurodegenerative condition.

Method: A systematic review and meta analysis was conducted and 6 studies out of 1202 were included. The total number of the patients were 4956 And all the studies were Randomised clinical trials. 5 RCTs included, outcome of (ADAS-Cog14, ADAS-Cog11, MMSE, CDR-SB Score), intervention number in each Trial (n1 = 578, n2 = 102, n3 = 50, n4 = 1057, n5 = 659), Analysis was done by Review manager program version 5.0 and I2 of less than 0.05 was considered significant.

Result: Improvements in cognitive subscale of the Alzheimer's Disease Assessment Scale (ADAS-cog14) were observed by 5 studies (Farlow, Honig, Joseph, Salloway, Siemers). The overall pooled results showed that Solanezumab is associated with a significant reduction in ADAS- Cog 14 scores as compared to placebo. (MD -1.18,95% CI(-1.96,-0.40); p = 0.003, I2 = 0%). ADAS-Cog11: Improvements in cognitive subscale of the Alzheimer's Disease Assessment Scale (ADAS-cog11) were observed by 2 studies(Farlow, Honig,). Pooled analysis showed that Solanezumab is associated with a significant reduction in ADAS- Cog 11 scores as compared to placebo. (MD -1.68,95% CI(-2.80,-0.55); p = 0.003, I2 = 0%) CDR-SB :Clinical Dementia Rating Sum of Boxes (CDR-SB) is reported by 5 studies (Honig, Joseph, Salloway, Siemers, Sperling). The overall pooled results showed that Solanezumab led to substantial improvement in CDR-SB as compared to placebo. (MD -0.22,95% CI(-0.42,-0.01); p = 0.04, I2 = 0%).

This is an open access article under the terms of the Creative Commons Attribution License, which permits use, distribution and reproduction in any medium, provided the original work is properly cited.

© 2024 The Alzheimer's Association. Alzheimer's & Dementia published by Wiley Periodicals LLC on behalf of Alzheimer's Association.

Conclusion: Solanezumab's potential as an Alzheimer's disease treatment has spurred considerable scientific interest and debate. This monoclonal antibody specifically targets beta-amyloid plaques, a prominent feature in Alzheimer's brains. While initial clinical trials showed disappointing results in terms of halting cognitive decline, some argue that the drug may still have promise when administered at earlier stages of the disease or in combination with other therapies.

	Solanezumab			Placebo				Mean Difference	Mean Difference	
Study or Subgroup	Mean	SD	Total	Mean	SD	Total	Weight	IV, Fixed, 95% Cl	IV, Fixed, 95% CI	
Honig 2018	1.87	3.2512	1057	2.21	3.6016	1072	49.0%	-0.34 [-0.63, -0.05]		
Joseph 2022	1.4	2	102	1.4	1.9	40	8.4%	0.00 [-0.71, 0.71]		
Salloway 2021	1.37	2.01	50	1.43	1.87	40	6.4%	-0.06 [-0.86, 0.74]		
Siemers 2016	1.53	3.3372	659	1.69	3.3473	663	32.1%	-0.16 [-0.52, 0.20]		
Sperling 2023	0.71	7.8826	405	0.6	6.8894	421	4.1%	0.11 [-0.90, 1.12]		
Total (95% CI)			2273			2236	100.0%	-0.22 [-0.42, -0.01]	•	
Heterogeneity: Chi ² = 1.69, df = 4 (P = 0.79); I ² = 0% I I I I Test for overall effect: Z = 2.09 (P = 0.04) -4 -2 0 2 Favours [Solanezumab] Favours [Placebo] Favours [Placebo] Favours [Placebo]										

	Solanezumab			Placebo				Mean Difference	Mean Difference	
Study or Subgroup	Mean	SD	Total	Mean	SD	Total	Weight	IV, Fixed, 95% CI	IV, Fixed, 95% CI	
Farlow 2012	0.2	14.4406	42	0.6	4.3335	10	4.8%	-0.40 [-5.53, 4.73]		
Honig 2018	3.26	10.7818	659	5	10.557	663	95.2%	-1.74 [-2.89, -0.59]	•	
Total (95% CI)			701			673	100.0%	-1.68 [-2.80, -0.55]	•	
Heterogeneity: Chi ² = 0.25, df = 1 (P = 0.62); l ² = 0% -										

	Solanezumab			Placebo				Mean Difference	Mean Difference
Study or Subgroup	Mean	SD	Total	Mean	SD	Total	Weight	IV, Fixed, 95% CI	IV, Fixed, 95% CI
Farlow 2012	-0.5	14.7615	42	-0.4	4.4733	10	2.2%	-0.10 [-5.36, 5.16]	
Honig 2018	6.65	11.7042	1057	7.44	11.7869	1072	61.2%	-0.79 [-1.79, 0.21]	•
Joseph 2022	1	14.1393	102	1.1	8.8544	40	4.0%	-0.10 [-3.98, 3.78]	
Salloway 2021	9.86	48.5075	50	9.4	40.7934	40	0.2%	0.46 [-18.00, 18.92]	
Siemers 2016	4.08	12.8355	659	6.21	12.6169	663	32.4%	-2.13 [-3.50, -0.76]	*
Total (95% CI)			1910			1825	100.0%	-1.18 [-1.96, -0.40]	•
Heterogeneity: Chi ² =		,		,	-20 -10 0 10 20				
Test for overall effect: Z = 2.96 (P = 0.003)									Favours [Solanezumab] Favours [Placebo]

Alzheimer's & Dementia®

THE JOURNAL OF THE ALZHEIMER'S ASSOCIATION



