ON-LINE APPENDIX

APOE ε 4

APOE ɛ4 is the strongest known common genetic risk factor for sporadic AD. APOE ɛ4 increases the age-specific risk of developing AD in a dose-dependent manner compared with noncarriers, at least through ages 85–90 years,^{1,2} and lowers the age of onset by up to 4–6 years for ε 4 homozygotes relative to noncarriers.^{1,3,4} Thus, ɛ4 status may be of importance diagnostically in the clinic, but it may also be important if medications are developed that affect carriers and noncarriers differently. Though it is not thought to increase synthesis of monomeric $A\beta_{1-42}$ (A β) in the brain,^{5,6} ɛ4 nevertheless increases the burden of synaptotoxic oligomeric A β ,⁷⁻⁹ particularly near synapses, and this is hypothesized to facilitate its higher potency in producing AD. Several studies have examined the effects of ɛ4 on rates of hippocampal volume loss,¹⁰⁻¹² with a few also assessing the effects of $A\beta$,¹³⁻¹⁶ but results have been inconsistent, and the effects across the diagnostic spectrum on cognitive rates of decline and rates of volume loss in multiple brain regions have not been well understood.

In follow-up analyses, we examined whether $\varepsilon 4$ interacted with age to affect rates of structural or clinical decline in each diagnostic group, that is, the additional effect of an age \times $\varepsilon 4$ interaction implemented with an extra term $b_{AgeAPOE}A_iE_it_{ij}$ in Equation 1, and, separately, whether $\varepsilon 4$ interacted with sex to affect the rates of structural or clinical decline, by including an extra term $b_{APOESex}E_iS_it_{ij}$ in Equation 1.

Interactions Among APOE $\epsilon 4,$ Age, and Sex on Rates of Decline

For HC and MCI cohorts, there were no significant $\varepsilon 4 \times \text{age}$, $\varepsilon 4 \times \text{sex}$, or sex \times age interactions on rates of structural or clinical decline.

In the AD cohort, the $\varepsilon 4 \times$ age interaction was significant only for the entorhinal cortex, for which $b_{AgeAPOE} = -0.1\%/year^2$ (SE = 0.05, P = .041), indicating that the slowing in rate of decline with advancing age is attenuated in $\varepsilon 4$ carriers compared with noncarriers. With the interaction term in the model, the sex effect remained significant, $b_{sex} = -0.57\%/year$ (SE = 0.22, P = .009), and the direct age effect also remained significant, $b_{Age} = 0.11\%/year^2$ (SE = 0.04, P = .006), but the direct $\varepsilon 4$ effect remained insignificant, $b_{APOE} = -0.36\%/year$ (SE = 0.25, P = .15).

There were no significant $\varepsilon 4 \times$ age interactions on cognitive measures, except for ADAS-Cog in MCI converters to AD for which $b_{AgeAPOE} = 0.28/year^2$ (SE = 0.10, P = .006). With the interaction term in the model, the sex effect remained significant, $b_{sex} = 1.55/year$ (SE = 0.51, P = .002), but the direct $\varepsilon 4$ effect showed only a trend toward significance, $b_{APOE} = -1.06/year$ (SE = 0.57, P = .063).

A significant $\varepsilon 4 \times \text{sex}$ effect was found only for ADAS-Cog in the AD cohort, for which $b_{\text{APOESex}} = 4.80/\text{year}$ (SE = 1.87, P = .011), indicating faster decline for women who are $\varepsilon 4$ carriers compared with all others. With this term in the model, the direct *APOE* $\varepsilon 4$ term remained insignificant, $b_{\text{APOE}} = -1.05\%/\text{year}$ (SE = 1.31, P = .42), but the direct sex term approached significance, $b_{\text{sex}} = -2.96/\text{year}$ (SE = 1.60, P = .064).

Rates of Decline for MCI-to-AD Converters

Because MCI is a heterogeneous condition, not necessarily prodromal AD, and *APOE* ɛ4 may have a selection effect for participants who are on an AD trajectory, we carried out an additional analysis restricted to MCI participants who converted to AD while being followed in the ADNI study.

On-line Table 1 shows the effects of age, *APOE* ε 4 status, and sex on atrophy rates and clinical decline in the subset of MCI participants who converted to AD. The b_{APOE} term was found to be significant for the amygdala, inferior parietal cortex, and middle temporal cortex, approaching significance for the entorhinal cortex (*P* = .060) and the whole brain (*P* = .064); the b_{Sex} term was significant for the amygdala, entorhinal cortex, medial orbito-frontal cortex, and ADAS-Cog, approaching significance for the whole brain (*P* = .063).

Effects of APOE $\epsilon 4$ and Sex on Baseline CSF and Clinical Measures

There was insufficient power to assess $\varepsilon 4 \times \text{sex}$ interactions on biomarker levels in the HC and AD groups (On-line Table 7 shows the number of participants in each category), but they could be explored in the MCI group, in which a trend toward significance was found for CSF A β concentrations (P = .08, Online Table 5B) and τ concentrations (P = .12). For A β concentrations, subsequent analysis showed that the $\varepsilon 4$ effect occurred only in men, with ɛ4 carriers having significantly lower values than noncarriers ($P = 3 \times 10^{-7}$, On-line Table 6A); in women, A β concentrations were comparably lower for both carriers and noncarriers (P = .498); there was, however, only a trend toward a sex effect in $\varepsilon 4$ noncarriers (lower concentrations for women, P =.105), whereas carriers had similarly low concentrations (P =.91). Thus, results in MCI suggest a potential interaction between sex and ε 4 status on CSF A β concentration, in which ε 4-negative status does not confer the same advantage to women as it does to men. For τ concentrations, although the interaction effect was not significant, subsequent analysis showed that whereas there was a significant $\varepsilon 4$ effect in both sexes (carriers had higher values, P =.025 for men and P = .014 for women, On-line Table 6A), the sex effect occurred only in ɛ4 carriers, in whom women had significantly higher concentrations than men (P = .036, On-line Table 6B, a pattern that also occurred in AD; P = .019); in noncarriers, τ concentrations were similarly low for both men and women (P = .955).

Interaction effects of $\varepsilon 4 \times$ sex were found in AD for ADAS-Cog and MMSE, and in MCI for MMSE, only (On-line Table 5*B*). Subsequent analysis showed that there was an $\varepsilon 4$ effect in AD for ADAS-Cog in men only, with carriers performing worse than noncarriers (On-line Table 6*A*). In women, there was no difference in performance on this measure as a function of $\varepsilon 4$ status: both groups performed comparably to men with an $\varepsilon 4$ allele. There was a sex effect in AD for MMSE for $\varepsilon 4$ noncarriers only, with women performing more poorly. In MCI, women with $\varepsilon 4$ performed more poorly than the other 3 groups (On-line Table 6*B*).

ADNI Database

Data used in the preparation of this article were obtained from the ADNI database (adni.loni.ucla.edu). The ADNI was launched in

2003 by the National Institute on Aging, the National Institute of Biomedical Imaging and Bioengineering, the Food and Drug Administration, private pharmaceutical companies, and nonprofit organizations as a \$60 million, 5-year public-private partnership. The primary goal of the ADNI has been to test whether serial MRI, PET, other biologic markers, and clinical and neuropsychological assessment can be combined to measure the progression of MCI and early AD. Determination of sensitive and specific markers of very early AD progression is intended to aid researchers and clinicians to develop new treatments and monitor their effectiveness as well as lessen the time and cost of clinical trials.

The Principal Investigator of this initiative is Michael W. Weiner, MD, VA Medical Center and University of California– San Francisco. ADNI is the result of efforts of many co-investigators from a broad range of academic institutions and private corporations, and subjects have been recruited from more than 50 sites across the United States and Canada. The initial goal of the ADNI was to recruit 800 adults, ages 55–90, to participate in the research, approximately 200 cognitively normal older individuals to be followed for 3 years, 400 people with MCI to be followed for 3 years, and 200 people with early AD to be followed for 2 years. For up-to-date information, see www.adni-info.org.

Participants

The ADNI general eligibility criteria have been described elsewhere.¹⁷ Briefly, participants are not depressed, have a modified Hachinski score of \leq 4, and have a study partner able to provide an independent evaluation of functioning. HC participants have a CDR of 0. Participants with MCI have a subjective memory complaint, objective memory loss measured by education-adjusted scores on Wechsler Memory Scale Logical Memory II, a CDR of 0.5, preserved activities of daily living, and absence of dementia. Participants with AD have a CDR of 0.5 or 1.0 and meet National Institute of Neurological Disorders and Stroke and Alzheimer's Disease and Related Disorders Association criteria for probable AD.

MRI Processing

We preprocessed all MRI scans with the use of image correction procedures for site-specific distortion effects updated for recent scanner changes.¹⁸ We quantified anatomical regional change in serial MRI with the use of Quarc,^{19,20} a recently developed method from our laboratory. The longitudinal outcome measure of change with respect to baseline was calculated by directly registering each follow-up scan to the baseline scan. To evaluate baseline ROI measurements, we used a structural MRI postprocessing technique that automatically delineates subcortical²¹ and cortical²² ROIs. We analyzed data from all available time points that passed local quality control (total = 2244). The number of follow-up scans was reduced by approximately 15% primarily as the result of motion artifacts, change in scanner model, or change in radiofrequency coil, as described in Holland et al.¹⁸

Methodologic bias in image registration, leading to artifactually elevated effect sizes and reduced sample size estimates, remains a concern in the structural neuroimaging literature.²⁰ Several robust approaches to reducing or eliminating bias have been developed.^{23,24} Our explicitly inverse-consistent approach¹⁹ essentially eliminates potential bias by combining forward and reverse image registrations and has been assessed vis-à-vis other approaches.²⁰

ACKNOWLEDGMENTS

Data collection and sharing for this project was funded by the Alzheimer's Disease Neuroimaging Initiative (National Institutes of Health Grant U01 AG024904). ADNI is funded by the National Institute on Aging, the National Institute of Biomedical Imaging and Bioengineering, and through generous contributions from the following: Abbott; Alzheimer's Association; Alzheimer's Drug Discovery Foundation; Amorfix Life Sciences, Ltd; AstraZeneca; Bayer HealthCare; BioClinica, Inc; Biogen Idec, Inc; Bristol-Myers Squibb Company; Eisai, Inc; Elan Pharmaceuticals, Inc; Eli Lilly and Company; F. Hoffmann-La Roche, Ltd, and its affiliated company, Genentech, Inc; GE Healthcare; Innogenetics, N.V.; IXICO Ltd; Janssen Alzheimer Immunotherapy Research & Development, LLC; Johnson & Johnson Pharmaceutical Research & Development LLC.; Medpace, Inc; Merck & Co, Inc; Meso Scale Diagnostics, LLC; Novartis Pharmaceuticals Corporation; Pfizer, Inc; Servier; Synarc Inc; and Takeda Pharmaceutical Company. The Canadian Institutes of Health Research is providing funds to support ADNI clinical sites in Canada. Private sector contributions are facilitated by the Foundation for the National Institutes of Health (www.fnih.org). The grantee organization is the Northern California Institute for Research and Education, and the study is coordinated by the Alzheimer's Disease Cooperative Study at the University of California, San Diego. ADNI data are disseminated by the Laboratory for Neuro Imaging at the University of California, Los Angeles. This research was also supported by NIH grants P30 AG010129 and K01 AG030514.

ON-LINE REFERENCES

- Sando SB, Melquist S, Cannon A, et al. APOE epsilon 4 lowers age at onset and is a high risk factor for Alzheimer's disease; a case control study from central Norway. *BMC Neurol* 2008;8:9
- Khachaturian AS, Corcoran CD, Mayer LS, et al. Apolipoprotein E epsilon4 count affects age at onset of Alzheimer disease, but not lifetime susceptibility: the Cache County Study. Arch Gen Psychiatry 2004;61:518–24
- 3. Corder EH, Saunders AM, Strittmatter WJ, et al. Apolipoprotein E, survival in Alzheimer's disease patients, and the competing risks of death and Alzheimer's disease. *Neurology* 1995;45:1323–28
- Kwon OD, Khaleeq A, Chan W, et al. Apolipoprotein E polymorphism and age at onset of Alzheimer's disease in a quadriethnic sample. Dement Geriatr Cogn Disord 2010;30:486–91
- Mawuenyega KG, Sigurdson W, Ovod V, et al. Decreased clearance of CNS beta-amyloid in Alzheimer's disease. Science 2010;330:1774
- Castellano JM, Kim J, Stewart FR, et al. Human apoE isoforms differentially regulate brain amyloid-beta peptide clearance. Sci Transl Med 2011;3:89ra57
- Prince JA, Zetterberg H, Andreasen N, et al. APOE epsilon4 allele is associated with reduced cerebrospinal fluid levels of Abeta42. Neurology 2004;62:2116–18
- Morris JC, Roe CM, Xiong C, et al. APOE predicts amyloid-beta but not tau Alzheimer pathology in cognitively normal aging. Ann Neurol 2010;67:122–31
- Koffie RM, Hashimoto T, Tai HC, et al. Apolipoprotein E4 effects in Alzheimer's disease are mediated by synaptotoxic oligomeric amyloid-beta. Brain 2012;135:2155–68
- 10. Morra JH, Tu Z, Apostolova LG, et al. Automated mapping of hippocampal atrophy in 1-year repeat MRI data from 490 subjects with

Alzheimer's disease, mild cognitive impairment, and elderly controls. *Neuroimage* 2009;45:S3–15

- Wolz R, Heckemann RA, Aljabar P, et al. Measurement of hippocampal atrophy using 4D graph-cut segmentation: application to ADNI. Neuroimage 2010;52:109–18
- Risacher SL, Shen L, West JD, et al. Longitudinal MRI atrophy biomarkers: relationship to conversion in the ADNI cohort. *Neurobiol Aging* 2010;31:1401–18
- 13. Schuff N, Woerner N, Boreta L, et al. **MRI of hippocampal volume** loss in early Alzheimer's disease in relation to ApoE genotype and biomarkers. *Brain* 2009;132:1067–77
- Tosun D, Schuff N, Truran-Sacrey D, et al. Relations between brain tissue loss, CSF biomarkers, and the ApoE genetic profile: a longitudinal MRI study. Neurobiol Aging 2010;31:1340–54
- Desikan RS, McEvoy LK, Holland D, et al. Apolipoprotein E ε4 does not modulate amyloid-beta-associated neurodegeneration in preclinical Alzheimer disease. AJNR Am J Neuroradiol 2013;34:505–10
- Chiang GC, Insel PS, Tosun D, et al. Impact of apolipoprotein E4cerebrospinal fluid beta-amyloid interaction on hippocampal volume loss over 1 year in mild cognitive impairment. *Alzheimers Dement* 2011;7:514–20
- 17. Petersen RC, Aisen PS, Beckett LA, et al. Alzheimer's Disease Neu-

roimaging Initiative (ADNI): clinical characterization. *Neurology* 2010;74:201–09

- Holland D, Brewer JB, Hagler DJ, et al. Subregional neuroanatomical change as a biomarker for Alzheimer's disease. *Proc Natl Acad Sci* U S A 2009;106:20954–59
- Holland D, Dale AM. Nonlinear registration of longitudinal images and measurement of change in regions of interest. *Med Image Anal* 2011;15:489–97
- Holland D, McEvoy LK, Dale AM. Unbiased comparison of sample size estimates from longitudinal structural measures in ADNI. *Hum Brain Mapp* 2012;33:2586–602
- 21. Fischl B, Salat DH, Busa E, et al. Whole brain segmentation: automated labeling of neuroanatomical structures in the human brain. *Neuron* 2002;33:341–55
- 22. Desikan RS, Segonne F, Fischl B, et al. An automated labeling system for subdividing the human cerebral cortex on MRI scans into gyral based regions of interest. *Neuroimage* 2006;31:968–80
- Reuter M, Schmansky NJ, Rosas HD, et al. Within-subject template estimation for unbiased longitudinal image analysis. *Neuroimage* 2012;61:1402–18
- Leung KK, Ridgway GR, Ourselin S, et al. Consistent multi-timepoint brain atrophy estimation from the boundary shift integral. *Neuroimage* 2012;59:3995–4005



ON-LINE FIG 1. Baseline cognitive performance, measured with CDR-SB, ADAS-Cog, and MMSE, by £4 status (left) and sex (right) for the HC, MCI, and AD cohorts. *Significant differences. Also see On-line Table 5A.



ON-LINE FIG 2. Top row shows baseline CSF $A\beta_{1-42}$ values for HC, MCI, and AD participants, with respect to age, categorized by *APOE* ε 4 status (upper row) and sex (lower row). Open circles with error bars are means for successive 5-year age ranges; closed circles represent individual participants. Lines are generalized linear model fits to the data. The linear fits show that regardless of diagnosis, *APOE* ε 4⁺ had consistently lower CSF $A\beta$ than *APOE* ε 4⁻. For the HC and MCI *APOE* ε 4⁺ participants, the linear fits suggest an increase in $A\beta$ burden with age (lower CSF $A\beta$), becoming independent of age for the AD cohort. For the *APOE* ε 4⁻ HCs, $A\beta$ burden appears to be independent of age. Unexpectedly, the $A\beta$ burden appeared to be greater for younger compared with older *APOE* ε 4⁻ MCI participants, but the positive slope (1.8 pg/[mL year], SE = 1.2) was not significantly different from zero (P = .15). The negative slope is also not significant (-0.9 pg/[mL year], SE = 0.7), but the difference between slopes approaches significance: P = .058.



ON-LINE FIG 3. See On-line Fig 1, but for baseline CSF p- τ . The negative p- τ slope for AD APOE $\varepsilon 4^+$ (-1.2 pg/[mL year], SE = 0.4) is significant: P = .01.



ON-LINE FIG 4. See On-line Fig 1, but for baseline CSF τ .

On-line Table 1: Direct effects of age, APOE ε 4, and sex on rates of change in individuals with MCI who converted to dementia within the 3-year follow-up period

Measure	b _o	b _{Cog}	b _{εdu}	Ь _{Аде} (SE; <i>P</i>)	Ь _{АРОЕ} (SE; <i>P</i>)	b _{Sex} (SE; <i>P</i>)
Hippocampus	-2.43^{a}	-0.09^{a}	-0.01	0.01 (.03; 0.8)	-0.22 (.33; .5)	-0.41 (.31; .2)
Amygdala	-2.10 ^a	-0.09^{a}	-0.04	0.03 (.03; .2)	-0.99 ^a (.33; .003)	-1.07^{a} (.31; 5 \times 10 ⁻⁴)
Entorhinal	-2.27 ^a	-0.03	0.00	0.05 ^a (.02; .026)	-0.47 (.25; .060)	-0.77 ^a (.23; .001)
Inferior parietal	-1.15 ^a	-0.06^{a}	0.02	0.06 ^a (.02; .002)	-0.57ª (.24; .017)	-0.30 (.22; .2)
Middle temporal	-1.80^{a}	-0.09^{a}	0.03	0.08 ^a (.02; .002)	-0.64 ^a (.28; .023)	-0.39 (.26; .1)
Med-orbito-frontal	-0.77 ^a	-0.03	0.05	0.01 (.02; .5)	-0.13 (.19; .5)	-0.46 ^a (.17; .008)
Whole brain	-0.82 ^a	-0.02	0.02	0.02 (.01; .070)	-0.25 (.13; .064)	-0.23 (.12; .063)
CDR-SB	1.21 ^a	_	-0.02	0.01 (0.01; .3)	0.09 (.17; .6)	0.23 (.16; .1)
ADAS-Cog	2.53ª	-	0.01	-0.01 (0.05; .8)	-0.58 (.56; .3)	1.41ª (.52; .007)
MMSE	-1.72 ^a	-	0.01	0.03 (0.03; .3)	-0.11 (.30; .7)	-0.20 (.29; .5)

Note:—b-Values are coefficients in Equation 1; for structural measures, units are annual thickness or volume change as a percentage of baseline size (%/year), and for cognitive measures they are annual score change, per ADAS-Cog unit in the case of b_{Cog} , and per year in the case of b_{Edu} and b_{Age} . Med-orbito-frontal indicates medial orbito-frontal cortex.

ROIs: N = 110; mean age = 75.77 years; mean ADAS-Cog = 13.06; mean years education = 15.66. Clinical: N = 139; mean age = 76.23 years; mean years education = 15.63. SE indicates standard error. P = P value for significance of b-coefficients.

^a Values significant at $P \leq .05$.

On-line Table 2A: Direct effects of age, APOE ε 4, and sex on rates of change in HC participants with CSF data

HC Measure <i>N</i> = 95/107 ⁶	Ьo	b _{Cog}	Ь _{Еdu}	b _{Age}	P_{Age}	b _{APOE}	PAPOE	b _{Sex}	P _{Sex}
Hippocampus	-0.7358^{a}	-0.0396	-0.0304	-0.0426 ^a	0.0054	-0.1318	0.4420	-0.1321	0.3806
Amygdala	-0.3995^{a}	0.0133	-0.0343	-0.0189	0.3381	-0.5853^{a}	0.0085	-0.4322^{a}	0.0267
Entorhinal	-0.4545^{a}	0.0088	-0.0248	-0.0261	0.1900	-0.4328	0.0539	-0.3905^{a}	0.0478
Inferior parietal	-0.4625^{a}	-0.0015	0.0076	0.0078	0.5433	-0.2011	0.1609	0.0801	0.5250
Middle temporal	-0.6826^{a}	-0.0098	-0.0039	0.0273 ^a	0.0466	-0.2521	0.1010	0.1012	0.4533
Med-orbito-frontal	-0.4509^{a}	-0.0180	-0.0063	0.0067	0.5736	-0.1502	0.2558	-0.0326	0.7782
Whole brain	-0.3639^{a}	0.0073	0.0009	0.0121	0.1302	-0.1573	0.0796	-0.0301	0.7020
CDR-SB	0.0571	_	0.0045	-0.0002	0.9621	0.1159 ^a	0.0461	0.0027	0.9572
ADAS-Cog	-0.4802^{a}	-	-0.0084	0.0264	0.3314	0.4185	0.1631	0.1300	0.6140
MMSE	-0.0506	_	-0.0311	-0.0138	0.1906	-0.1073	0.3571	0.0027	0.9785

Note:—See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

^b Number of participants in ROI analyses/number in clinical analyses.

On-line Table 2B: Direct effects of age, APOE £4, and sex on rates of change in participants with MCI with CSF data

MCI Measure									
N = 147/169 ^b	Ьo	b _{cog}	Ь _{Еdu}	b_{Age}	P_{Age}	b _{APOE}	PAPOE	b _{sex}	P _{Sex}
Hippocampus	-2.0205^{a}	-0.1192ª	0.0058	-0.0126	0.6110	-0.3303	0.2462	-0.3598	0.2228
Amygdala	-1.7862ª	-0.1390	0.0451	0.0621 ^a	0.0076	-0.7454^{a}	0.0054	-0.8419^{a}	0.0025
Entorhinal	-1.9059^{a}	-0.1111ª	-0.0221	0.0456 ^a	0.0270	-0.2784	0.2401	-0.6526^{a}	0.0080
Inferior parietal	-1.0310^{a}	-0.0792^{a}	0.0075	0.0562ª	0.0009	-0.1823	0.3494	-0.5099^{a}	0.0118
Middle temporal	-1.5571ª	-0.1101^{a}	-0.0178	0.0640 ^a	0.0022	-0.0327	0.8911	-0.8062^{a}	0.0012
Med-orbito-frontal	-0.8515^{a}	-0.0488^{a}	0.0443	0.0166	0.2156	0.2145	0.1643	-0.4547^{a}	0.0046
Whole brain	-0.7901^{a}	-0.0411^{a}	0.0139	0.0231ª	0.0181	0.0153	0.8917	-0.2848^{a}	0.0148
CDR-SB	0.4798 ^a	-	0.0101	0.0246	0.0581	0.4252 ^a	0.0040	0.3408 ^a	0.0326
ADAS-Cog	0.2702	-	0.0205	0.0551	0.1751	0.9146 ^a	0.0484	1.8267ª	0.0003
MMSE	-0.2088	-	-0.0097	-0.0255	0.3315	-0.9983^{a}			

Note:---See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

^b Number of participants in ROI analyses/number in clinical analyses.

On-line Table 2C: Direct effects of age, APOE ε 4, and sex on rates of change in participants with AD with CSF data

AD Measure									
N = 65/78 ^b	bo	b _{cog}	b _{Edu}	b _{Age}	P_{Age}	b _{APOE}	PAPOE	b _{Sex}	P _{Sex}
Hippocampus	-2.3602^{a}	-0.0697	-0.0101	0.0345	0.3242	-0.9650^{a}	0.0345	-0.7228	0.0665
Amygdala	-2.3926^{a}	-0.0394	-0.0337	0.0240	0.5046	-0.9151	0.0513	-0.9114^{a}	0.0245
Entorhinal	-2.1663ª	-0.0474	-0.0697	0.0514 ^a	0.0387	-0.8120^{a}	0.0122	-0.6985^{a}	0.0119
Inferior parietal	-1.5070^{a}	-0.0903^{a}	-0.0105	0.1350 ^a	0.0000	-0.3966	0.2019	-0.8234^{a}	0.0024
Middle temporal	-2.3257^{a}	-0.1318^{a}	-0.0496	0.1559 ^a	0.0000	-0.3848	0.2761	-0.9883^{a}	0.0014
Med-orbito-frontal	-0.8551^{a}	0.0034	-0.0293	0.0480 ^a	0.0091	0.1746	0.4642	-0.8418^{a}	0.0000
Whole brain	-0.7822^{a}	-0.0517^{a}	-0.0019	0.0530 ^a	0.0000	-0.2498	0.1220	-0.5332^{a}	0.0001
CDR-SB	1.4401 ^a	-	0.1595ª	0.0268	0.4030	-0.1134	0.7815	0.5184	0.1328
ADAS-Cog	2.9904 ^a	-	0.3394	-0.0947	0.3921	0.2238	0.8742	1.4690	0.2190
MMSE	-1.9407ª	_	-0.1458	0.1104	0.0874	0.2789	0.7342	-0.2064	0.7659

Note:—See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

^b Number of participants in ROI analyses/number in clinical analyses.

On-line Table 3A: Direct effects of age, APOE ε 4, sex, and A β on rates of change in HC

HC Measure											
N = 95/107 ^b	bo	b_{Cog}	b _{εdu}	b_{Age}	\mathbf{p}_{Age}	b _{APOE}	PAPOE	b _{Sex}	P _{Sex}	b _{Aβ}	Ρ _{Αβ}
Hippocampus	-0.7717^{a}	-0.0336	-0.0306	-0.0418^{a}	0.0062	-0.0215	0.9118	-0.1128	0.4545	0.0019	0.2347
Amygdala	-0.4557^{a}	0.0224	-0.0344	-0.0176	0.3679	-0.4155	0.0966	-0.4018^{a}	0.0387	0.0029	0.1574
Entorhinal	-0.4699^{a}	0.0114	-0.0249	-0.0258	0.1967	-0.3856	0.1311	-0.3821	0.0542	0.0008	0.6991
Inferior parietal	-0.4901^{a}	0.0032	0.0075	0.0084	0.5094	-0.1170	0.4726	0.0950	0.4524	0.0014	0.2799
Middle temporal	-0.7105^{a}	-0.0051	-0.0040	0.0279 ^a	0.0410	-0.1666	0.3386	0.1163	0.3895	0.0015	0.3050
Med-orbito-frontal	-0.4772^{a}	-0.0132	-0.0063	0.0073	0.5364	-0.0696	0.6418	-0.0185	0.8737	0.0014	0.2555
Whole brain	-0.3784^{a}	0.0098	0.0008	0.0124	0.1196	-0.1128	0.2681	-0.0222	0.7792	0.0008	0.3601
CDR-SB	0.0680	-	0.0043	-0.0004	0.9428	0.0734	0.2605	0.0007	0.9884	-0.0007	0.1658
ADAS-Cog	-0.4801^{a}	_	-0.0084	0.0264	0.3314	0.4180	0.2190	0.1300	0.6141	0.0000	0.9976
MMSE	-0.0861	-	-0.0297	-0.0140	0.1762	0.0317	0.8066	0.0083	0.9321	0.0022 ^a	0.0238

Note:—See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

^b Number of participants in ROI analyses/number in clinical analyses.

On-line Table 3B: Direct effects of age, APOE ϵ 4, sex, and A β on rates of change in MCI

MCI Measure											
N = 147/169 ^b	bo	b_{Cog}	b _{εdu}	b_{Age}	\mathbf{p}_{Age}	b _{APOE}	PAPOE	b _{Sex}	P _{Sex}	b _{Aβ}	Ρ _Α β
Hippocampus	-2.1172ª	-0.1144^{a}	0.0080	-0.0160	0.5144	-0.1625	0.5860	-0.3466	0.2352	0.0047	0.0886
Amygdala		-0.1332^{a}	0.0470	0.0580 ^a	0.0112	-0.5520^{a}	0.0470	-0.8269^{a}	0.0024	0.0054 ^a	0.0352
Entorhinal	-2.0113ª	-0.1058^{a}	-0.0199	0.0419 ^a	0.0395	-0.0931	0.7061	-0.6389^{a}	0.0083	0.0051 ^a	0.0243
Inferior parietal	-1.0569ª	-0.0779^{a}	0.0080	0.0553 ^a	0.0011	-0.1373	0.5041	-0.5058^{a}	0.0121	0.0013	0.5002
Middle temporal	-1.6065^{a}	-0.1077^{a}	-0.0167	0.0622 ^a	0.0028	0.0530	0.8332	-0.7996^{a}	0.0012	0.0024	0.2984
Med-orbito-frontal	-0.8462^{a}	-0.0491^{a}	0.0442	0.0168	0.2119	0.2051	0.2102	-0.4555^{a}	0.0046	-0.0003	0.8633
Whole brain	-0.7859^{a}	-0.0413^{a}	0.0138	0.0233 ^a	0.0180	0.0080	0.9467	-0.2855^{a}	0.0147	-0.0002	0.8482
CDR-SB	0.5464 ^ª	-	0.0070	0.0250	0.0505	0.3107 ^a	0.0487	0.3170 ^a	0.0442	-0.0027	0.0584
ADAS-Cog	0.5043	-	0.0115	0.0567	0.1577	0.5060	0.3072	1.7476 ^a	0.0004	-0.0095^{a}	0.0344
MMSE	-0.3697	-	-0.0028	-0.0262	0.3108	-0.7185^{a}	0.0237	-0.5836	0.0656	0.0065ª	0.0234

Note:---See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

^b Number of participants in ROI analyses/number in clinical analyses.

On-line Table 3C: Direct effects of age, APOE arepsilon4, sex, and Aeta on rates of change in AD

AD Measure											
N = 65/78 ^b	bo	b_{Cog}	b _{εdu}	b_{Age}	\mathbf{p}_{Age}	b _{APOE}	PAPOE	b _{Sex}	P _{Sex}	b _{Aβ}	Ρ _Α β
Hippocampus	-2.3223^{a}	-0.0703	-0.0083	0.0359	0.3073	-1.0322ª	0.0352	-0.6933	0.0838	-0.0020	0.7077
Amygdala	-2.5179 ^a	-0.0376	-0.0395	0.0193	0.5906	-0.6934	0.1655	-1.0075^{a}	0.0141	0.0067	0.2303
Entorhinal	-2.2334 ^a	-0.0467	-0.0727	0.0489 ^a	0.0476	-0.6958^{a}	0.0430	-0.7477^{a}	0.0076	0.0035	0.3555
Inferior parietal	—1.5753 ^a	-0.0894^{a}	-0.0138	0.1324 ^a	0.0000	-0.2762	0.4039	-0.8751^{a}	0.0014	0.0037	0.3216
Middle temporal	-2.4393 ^a	-0.1301^{a}	-0.0552	0.1515ª	0.0000	-0.1863	0.6179	-1.0725^{a}	0.0005	0.0060	0.1485
Med-orbito-frontal	-0.9168ª	0.0038	-0.0311	0.0453 ^a	0.0121	0.2836	0.2597	-0.8911^{a}	0.0000	0.0032	0.2443
Whole brain	-0.7956^{a}	-0.0516^{a}	-0.0025	0.0525 ^a	0.0000	-0.2260	0.1934	-0.5438^{a}	0.0002	0.0007	0.7119
CDR-SB	1.6222ª	-	0.1646 ^a	0.0337	0.2861	-0.4198	0.3349	0.6277	0.0678	-0.0087	0.0741
ADAS-Cog	3.5894ª	_	0.3557	-0.0717	0.5115	-0.7730	0.6076	1.8108	0.1279	-0.0284	0.0939
MMSE	-2.0679^{a}	-	-0.1492	0.1054	0.1053	0.4935	0.5801	-0.2846	0.6863	0.0062	0.5386

Note:—See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

^b Number of participants in ROI analyses/number in clinical analyses.

On-line Table 4A: Direct effects of age, APOE ε 4, sex, A β , and p-au on rates of change in HC

HC Measure													
$N = 95/107^{\circ}$	D ₀	D _{Cog}	D _{Edu}	D _{Age}	P _{Age}	DAPOE	PAPOE	D _{Sex}	P _{Sex}	Þ _{Aβ}	Ρ _Α β	D _{Ptau}	P _{Ptau}
Hippocampus	-0.771^{a}	-0.034	-0.030	-0.041^{a}	0.0080	-0.0196	0.9197	-0.1149	0.4472	0.0018	0.2833	-0.0011	0.8495
Amygdala	-0.450^{a}	0.022	-0.027	-0.011	0.5607	-0.3933	0.1082	-0.4261^{a}	0.0255	0.0017	0.4081	-0.0123	0.0796
Entorhinal	-0.464^{a}	0.011	-0.020	-0.022	0.2849	-0.3715	0.1432	-0.4001^{a}	0.0429	0.0000	0.9823	-0.0081	0.2665
Inferior parietal	-0.491^{a}	0.003	0.006	0.007	0.5749	-0.1209	0.4571	0.0994	0.4319	0.0016	0.2397	0.0022	0.6329
Middle temporal	-0.713^{a}	-0.005	-0.007	0.026	0.0634	-0.1737	0.3184	0.1248	0.3570	0.0018	0.2183	0.0041	0.4084
Med-orbito-frontal	-0.480^{a}	-0.013	-0.009	0.005	0.6645	-0.0749	0.6139	-0.0108	0.9255	0.0018	0.1652	0.0042	0.3299
Whole brain	-0.378^{a}	0.010	0.001	0.013	0.1167	-0.1118	0.2731	-0.0234	0.7677	0.0007	0.4206	-0.0006	0.8326
CDR-SB	0.062	-	0.002	-0.003	0.5852	0.0681	0.2850	0.0125	0.7974	-0.0003	0.5975	0.0042	0.0279
ADAS-Cog	-0.497^{a}	-	-0.015	0.020	0.4717	0.4071	0.2273	0.1639	0.5238	0.0012	0.6646	0.0118	0.2479
MMSE	-0.094	-	-0.033	-0.017	0.1017	0.0246	0.8481	0.0253	0.7957	0.0028 ^a	0.0074	0.0059	0.1274

Note:—See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

^b Number of participants in ROI analyses/number in clinical analyses.

On-line Table 4B: Direct effects of age, APOE ϵ 4, sex, A β , and p- τ on rates of change in MCI

MCI Measure													
N = 147/169 ^b	Ь _о	b_{Cog}	b_{Edu}	b_{Age}	\mathbf{p}_{Age}	b _{APOE}	PAPOE	b _{Sex}	Psex	b _{Aβ}	Ρ _{Αβ}	b_{Ptau}	P _{Ptau}
Hippocampus	-2.124^{a}	-0.113^{a}	0.008	-0.017	0.4999	-0.1521	0.6103	-0.3452	0.2360	0.0041	0.1733	-0.0044	0.6113
Amygdala	-1.932 ^a	-0.125^{a}	0.045	0.055 ^a	0.0139	-0.5005	0.0653	-0.8184^{a}	0.0021	0.0024	0.3692	-0.0219	0.0055
Entorhinal	-2.044^{a}	-0.098^{a}	-0.022	0.040 ^a	0.0467	-0.0449	0.8524	-0.6323^{a}	0.0074	0.0024	0.3269	-0.0201	0.0042
Inferior parietal	-1.064ª	-0.076^{a}	0.008	0.055 ^a	0.0013	-0.1269	0.5369	-0.5042^{a}	0.0121	0.0007	0.7490	-0.0045	0.4492
Middle temporal	-1.627 ^a	-0.103^{a}	-0.018	0.061 ^a	0.0033	0.0831	0.7391	-0.7955^{a}	0.0011	0.0006	0.8194	-0.0133	0.0667
Med-orbito-frontal	-0.846^{a}	-0.049^{a}	0.044	0.017	0.2126	0.2051	0.2111	-0.4555^{a}	0.0046	-0.0003	0.8725	0.0000	0.9960
Whole brain	-0.784^{a}	-0.042^{a}	0.014	0.024 ^a	0.0172	0.0048	0.9682	-0.2860^{a}	0.0146	0.0000	0.9840	0.0014	0.6950
CDR-SB	0.561 ^a	-	0.007	0.025 ^a	0.0492	0.2855	0.0706	0.3170 ^a	0.0428	-0.0019	0.2091	0.0055	0.2316
ADAS-Cog	0.599	-	0.015	0.056	0.1527	0.3390	0.4881	1.7498	0.0003	-0.0046	0.3350	0.0361	0.0121
MMSE	-0.419	-	-0.005	-0.026	0.3041	-0.6325^{a}	0.0447	-0.5839	0.0610	0.0040	0.1998	-0.0186	0.0458

Note:—See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

 $^{\rm b}$ Number of participants in ROI analyses/number in clinical analyses.

On-line Table 4C: Direct effects of age, APOE ε 4, sex, A β , and p-au on rates of change in AD

AD Measure													
N = 65/78 ^b	Ь _о	b_{Cog}	b_{Edu}	b_{Age}	\mathbf{p}_{Age}	b _{APOE}	PAPOE	b _{Sex}	P _{Sex}	b _{Aβ}	Ρ _{Αβ}	b_{Ptau}	\mathbf{p}_{Ptau}
Hippocampus	-2.308^{a}	-0.069	-0.007	0.031	0.4222	-1.0478^{a}	0.0338	-0.7020	0.0810	-0.0024	0.6668	-0.0032	0.7739
Amygdala	-2.435^{a}	-0.029	-0.030	-0.012	0.7592	-0.7882	0.1069	-1.0607 ^a	0.0081	0.0043	0.4374	-0.0203	0.0667
Entorhinal	-2.161ª	-0.038	-0.064	0.018	0.4953	-0.7828^{a}	0.0162	-0.8052^{a}	0.0024	0.0014	0.7027	- <u>0.0196</u>	0.0075
Inferior parietal	—1.538ª	-0.085^{a}	-0.010	0.119 ^a	0.0000	-0.3182	0.3378	-0.8993^{a}	0.0010	0.0027	0.4833	-0.0088	0.2442
Middle temporal	-2.393^{a}	-0.125^{a}	-0.050	0.135 ^a	0.0000	-0.2397	0.5202	-1.1014 ^a	0.0004	0.0048	0.2623	-0.0110	0.1934
Med-orbito-frontal	-0.906^{a}	0.005	-0.030	0.041 ^a	0.0427	0.2720	0.2807	-0.9024^{a}	0.0000	0.0029	0.3053	-0.0028	0.6183
Whole brain	-0.793^{a}	-0.051^{a}	-0.002	0.051 ^a	0.0003	-0.2290	0.1898	-0.5460^{a}	0.0002	0.0006	0.7486	-0.0007	0.8650
CDR-SB	1.595 ^ª	-	0.165ª	0.041	0.2326	-0.3879	0.3762	0.6390	0.0629	-0.0080	0.1112	0.0052	0.5899
ADAS-Cog	3.484 ^a	-	0.357	-0.043	0.7131	-0.6498	0.6676	1.8531	0.1184	-0.0257	0.1409	0.0200	0.5472
MMSE	-2.054 ^a	-	-0.149	0.102	0.1500	0.4773	0.5962	-0.2903	0.6809	0.0058	0.5750	-0.0026	0.8972

Note:—See On-line Table 1 for units and key.

^a Values significant at $P \leq .05$.

 $^{\rm b}$ Number of participants in ROI analyses/number in clinical analyses.

On-line Table 5A: Expected baseline CSF and cognitive values for each cohort: Effects	of APOE and sex
---	-----------------

	ε4⁻ (SE)	ε4 ⁺ (SE)	Р	Male (SE)	Female (SE)	Р
Aβ						
HC	218.63 (5.17)	156.57 (9.48)	$< 10^{-6a}$	205.20 (6.39)	203.57 (6.45)	.9
MCI	183.17 (5.67)	142.57 (5.11)	$< 10^{-6a}$	163.40 (4.59)	155.08 (6.76)	.3
AD	166.27 (7.47)	132.46 (4.46)	$2 imes 10^{-4a}$	136.33 (4.94)	148.85 (6.05)	.11
p- <i>τ</i>						
HC	22.97 (1.53)	32.79 (2.80)	.003 ^a	26.12 (1.89)	24.30 (1.90)	.5
MCI	30.27 (2.01)	40.68 (1.81)	$3 imes 10^{-4a}$	35.12 (1.62)	37.94 (2.39)	.3
AD	46.19 (4.06)	40.93 (2.42)	.3	44.48 (2.68)	39.06 (3.29)	.2
au						
HC	66.93 (3.28)	81.57 (6.01)	.038 ^a	69.97 (4.05)	70.60 (4.09)	.9
MCI	87.43 (6.93)	120.40 (6.24)	$9 imes10^{-4a}$	99.41 (5.62)	118.89 (8.20)	.060
AD	127.02 (12.19)	118.31 (7.40)	.5	113.67 (8.15)	131.24 (10.03)	.2
CDR-SB						
HC	0.03 (0.01)	0.02 (0.01)	.7	0.01 (0.01)	0.05 (0.01)	.006ª
MCI	1.49 (0.07)	1.70 (0.07)	.031 ^a	1.62 (0.06)	1.58 (0.08)	.7
AD	4.14 (0.23)	4.20 (0.15)	.8	3.99 (0.17)	4.40 (0.19)	.1
ADAS-Cog						
HC	6.12 (0.23)	6.56 (0.38)	.3	6.62 (0.27)	5.83 (0.28)	.052
MCI	10.58 (0.34)	12.45 (0.31)	$9 imes10^{-5a}$	11.69 (0.28)	11.39 (0.39)	.5
AD	17.70 (0.83)	18.48 (0.54)	.4	18.40 (0.62)	18.05 (0.67)	.7
MMSE						
HC	29.07 (0.08)	29.21 (0.12)	.4	28.93 (0.09)	29.29 (0.09)	.007 ^a
MCI	27.18 (0.14)	26.86 (0.13)	.1	27.13 (0.11)	26.77 (0.16)	.072
AD	23.44 (0.30)	23.40 (0.20)	.9	23.39 (0.23)	23.43(0.25)	0.9

Note:—Units are pg/mL for CSF values. All values for APOE &4 effects (left half of table) are covaried for age and sex; all values for sex effects (right half of table) are covaried for age and APOE; clinical values are additionally covaried for education.

SE indicates standard error; P = P value for paired comparisons (significance of the effect, ie, the difference in the expected values).

 $^{\rm a}$ Differences significant at P< .05. See print Fig 3 and On-line Fig 1. Numbers of participants are in On-line Table 7.

On-line Table 5B: Expected baseline CSF and cognitive values for each cohort: Direct and interaction effects of APOE and sex

	ε4⁻	SE	ε4⁺	SE	Р	Male	SE	Female	SE	Р	P ε4 × Sex
Aβ											
HC	218.69	5.20	157.20	9.53	1×10^{-7a}	205.36	6.42	203.80	6.48	.9	.785
MCI	181.78	5.64	142.27	5.08	$6 imes10^{-7a}$	162.88	4.57	153.70	6.72	.3	.083
AD	166.59	7.48	132.46	4.46	$2 imes10^{-4a}$	136.40	4.95	148.95	6.06	.113	.366
р- <i>т</i>											
HC	23.00	1.53	33.14	2.81	.002ª	26.21	1.89	24.43	1.91	.5	.605
MCI	30.15	2.01	40.65	1.81	$2 imes 10^{-4a}$	35.08	1.63	37.82	2.39	.3	.675
AD	45.90	4.02	40.93	2.40	.3	44.41	2.66	38.97	3.26	.2	.123
au											
HC	67.25	3.21	84.97	5.88	.009 ^a	70.81	3.96	71.83	4.00	.9	.018ª
MCI	85.91	6.90	120.07	6.21	$3 imes 10^{-4a}$	98.84	5.60	117.40	8.16	.063	.120
AD	126.07	11.99	118.33	7.28	.6	113.48	8.02	130.93	9.87	.2	.067
CDR-SB											
HC	0.03	0.01	0.01	0.01	.3	0.01	0.01	0.05	0.01	.014 ^a	.628
MCI	1.49	0.07	1.73	0.07	.012ª	1.62	0.06	1.63	0.08	.9	.631
AD	4.12	0.23	4.58	0.15	.102	3.99	0.17	4.97	0.19	$2 imes10^{-4a}$.117
ADAS-Cog											
HC	6.12	0.23	6.26	0.38	.7	6.62	0.27	5.66	0.28	.015	.556
MCI	10.57	0.34	12.15	0.31	$6 imes10^{-4a}$	11.69	0.28	10.92	0.39	.110	.485
AD	17.54	0.81	21.14	0.53	$3 imes 10^{-4a}$	18.33	0.60	22.09	0.65	$4 imes 10^{-5a}$.004 ^a
MMSE											
HC	29.07	0.08	29.17	0.12	.5	28.93	0.09	29.27	0.09	.009 ^a	.535
MCI	27.19	0.14	27.17	0.13	.9	27.13	0.11	27.25	0.16	.5	.044 ^a
AD	23.48	0.30	22.64	0.20	.021ª	23.41	0.22	22.30	0.24	$9 imes10^{-4a}$.018ª

Note:—See On-line Table 5A for units and key.

^a Differences significant at P < .05.

Along with the direct effects, $e4 \times sex$ effects are additionally modeled; p-value for $e4 \times sex$ gives the significance of the interaction term alone.

			Male		Female					
	ε4⁻	SE	ε4*	SE	Р	ε4⁻	SE	ε4 ⁺	SE	Р
Aβ										
HC	220.60	7.52	154.72	11.75	$2 imes 10^{-5a}$	217.09	7.22	158.97	16.14	.002 ^a
MCI	190.47	6.45	140.82	6.29	$3 imes 10^{-7a}$	158.86	11.44	147.42	8.65	.498
AD	156.97	10.06	129.27	6.13	.023 ^a	178.96	10.97	137.93	6.33	.004 ^a
р- <i>т</i>										
HC	24.22	2.37	32.58	3.70	.067	21.78	1.99	33.67	4.45	.018 ^a
MCI	29.95	2.32	39.38	2.26	.005ª	29.25	4.03	44.06	3.05	.015ª
AD	52.31	5.75	41.23	3.51	.107	35.09	4.97	40.89	2.87	.340
au										
HC	70.38	4.65	71.64	7.26	.886	64.07	4.47	98.54	10.00	.003 ^a
MCI	87.02	7.35	110.58	7.16	.025ª	82.02	15.85	140.99	11.98	.014 ^a
AD	134.84	14.52	105.50	8.98	.093	111.76	21.08	138.13	12.43	.310
CDR-SB										
HC	0.01	0.01	0.00	0.01	.515	0.05	0.02	0.06	0.03	.841
MCI	1.48	0.09	1.73	0.08	.049 ^a	1.45	0.11	1.70	0.10	.135
AD	3.68	0.34	4.09	0.21	.317	4.61	0.31	4.33	0.21	.476
ADAS-Cog										
HC	6.53	0.29	6.69	0.49	.783	5.69	0.36	6.38	0.59	.323
MCI	10.78	0.40	12.40	0.37	.004 ^a	9.96	0.60	12.72	0.55	.003ª
AD	15.94	1.13	19.45	0.70	.012ª	19.33	1.17	17.32	0.81	.174
MMSE										
HC	29.00	0.11	29.05	0.18	.816	29.14	0.10	29.36	0.17	.273
MCI	27.16	0.17	27.13	0.16	.889	27.16	0.23	26.41	0.21	.030ª
AD	24.07	0.44	23.17	0.28	.091	22.78	0.41	23.68	0.28	.082

Note:—This table shows the results of modeling the effects of APOE &4 on baseline values, independently in men and in women. Units are pg/mL for CSF values. All values are covaried for age; clinical values are additionally covaried for education.

SE indicates standard error; P = P value for paired comparisons (significance of the effect, ie, the difference in the expected values).

^a Differences significant at P < .05.

Numbers of participants are shown in On-line Table 7.

On-line Table 6B: Baseline CSF and cognitive values: APOE $\epsilon4^-$ and APOE $\epsilon4^+$ sex effects

			ε4⁻	٤4*						
	Male	SE	Female	SE	Р	Male	SE	Female	SE	Р
Aβ										
HC	220.44	7.69	217.15	7.16	.756	155.72	11.68	157.60	15.58	.924
MCI	190.06	7.63	165.33	13.00	.105	142.51	5.27	141.45	6.96	.910
AD	157.02	13.33	182.59	17.00	.258	128.84	4.86	137.32	5.87	.273
р- <i>т</i>										
HC	24.02	1.80	21.63	1.67	.334	32.98	5.31	34.58	7.08	.859
MCI	29.88	2.20	31.23	3.75	.758	39.29	2.38	43.17	3.14	.363
AD	51.21	5.92	34.79	7.55	.108	41.96	2.96	40.52	3.58	.759
τ										
HC	70.20	4.15	63.63	3.86	.251	72.80	10.03	99.46	13.37	.127
MCI	87.96	6.49	88.67	10.96	.955	107.50	8.87	140.94	11.62	.036ª
AD	134.47	19.88	111.87	25.35	.497	105.89	8.35	137.72	10.15	.019 ^a
CDR-SB										
HC	0.01	0.01	0.05	0.01	.031 ^a	0.00	0.02	0.05	0.02	.088
MCI	1.49	0.08	1.50	0.12	.924	1.73	0.08	1.64	0.11	.552
AD	3.72	0.32	4.68	0.32	.052	4.11	0.21	4.26	0.23	.633
ADAS-Cog										
HC	6.62	0.30	5.57	0.31	.021 ^a	6.68	0.62	6.45	0.63	.798
MCI	10.89	0.40	10.23	0.56	.335	12.36	0.40	12.39	0.54	.965
AD	15.74	1.19	19.58	1.19	.036ª	19.43	0.70	17.32	0.79	.055
MMSE										
HC	28.92	0.11	29.25	0.11	.038ª	28.95	0.17	29.43	0.18	.063
MCI	27.09	0.16	27.15	0.23	.826	27.21	0.16	26.38	0.21	.003 ^a
AD	24.12	0.43	22.70	0.44	.036 ^a	23.12	0.26	23.75	0.29	.121

Note:—See On-line Table 6A for units and key. This table shows the results of modeling the effects of sex on baseline values, independently in ε 4 noncarriers and in carriers. ^a Differences significant at P < .05.

On-line Table 7: Number of participants with baseline CSF and cognitive data

	M	ale	Fen	male
	ε4⁻	ε 4 ⁺	ε4-	ε4*
CSFª				
HC	39	16	45	9
MCI	58 ^c	61 ^d	20	35
AD	13	35 ^e	8	24 ^f
Cog ^b				
HC	84	30	79	29
MCI	106	122	54	66
AD	24 ^g	60	23	49

^aCSF: A β , p- τ , and τ . ^b Cog: CDR-SB, ADAS-Cog, and MMSE. ^{c-f} For τ . ^c57, ^d60, ^e34, ^f23. ^g For ADAS-Cog: 23.