

# *Genetic Heterogeneity of Clinically Defined AD*

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Indiana ADC

ADC Clinical Core Leaders Meeting

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# Disclosures & Acknowledgements

## Disclosures

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- Editor-in-Chief, *Brain Imaging and Behavior*, a Springer Nature journal

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    - U01 AG032984, U24 AG21886, P30 AG010129, K01 AG030514
  - National Institute of Biomedical Imaging and Bioengineering
  - National Library of Medicine: R01 LM011360 and K99/R00 LM011384
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    - ADNI methylation project (AbbVie, Biogen and J&J, in-kind support)
  - Alzheimer’s Association & Brin Wojcicki Foundation – Whole Genome Sequencing
- The Indiana Neurorepository Project**
- IUSM Strategic Research Initiative (SRI), Indiana Spinal Cord and Brain Injury Research Fund, CTSI



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# Overview

- Dimensions of Heterogeneity
- Genes and gene pathways
  - Impact on risk/protective factors
  - Influence on age of onset
- Cognitive subtypes and trajectories
- Signal or noise? Can we model heterogeneity?
- Implications



# High Dimensionality Landscape

Subjective Cognitive Decline

Amyloid - PET/CSF

Informant Perception

Tau - PET/CSF

Cognitive Performance

MRI - structure

Social Networks

MRI - function

Lifestyle & environment

Connectome

- *Cognitive stimulation, diet, exercise, sleep*

Vascular function & CVD burden

Biomarkers

- *CSF, blood, others*
- *Multi-omics*

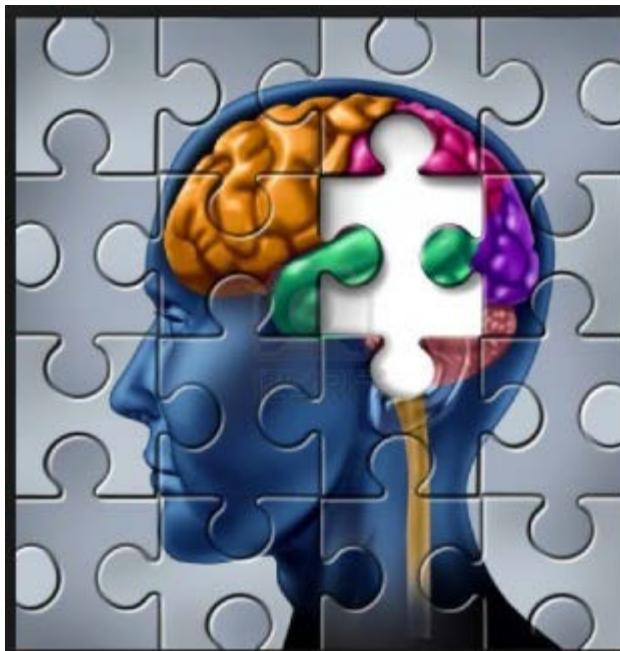
Immune System,  
Inflammation &  
Oxidative Stress

Genomics

- *DNA, mRNA, miRNA*
- *Epigenetics*

Metabolism & Mitochondria

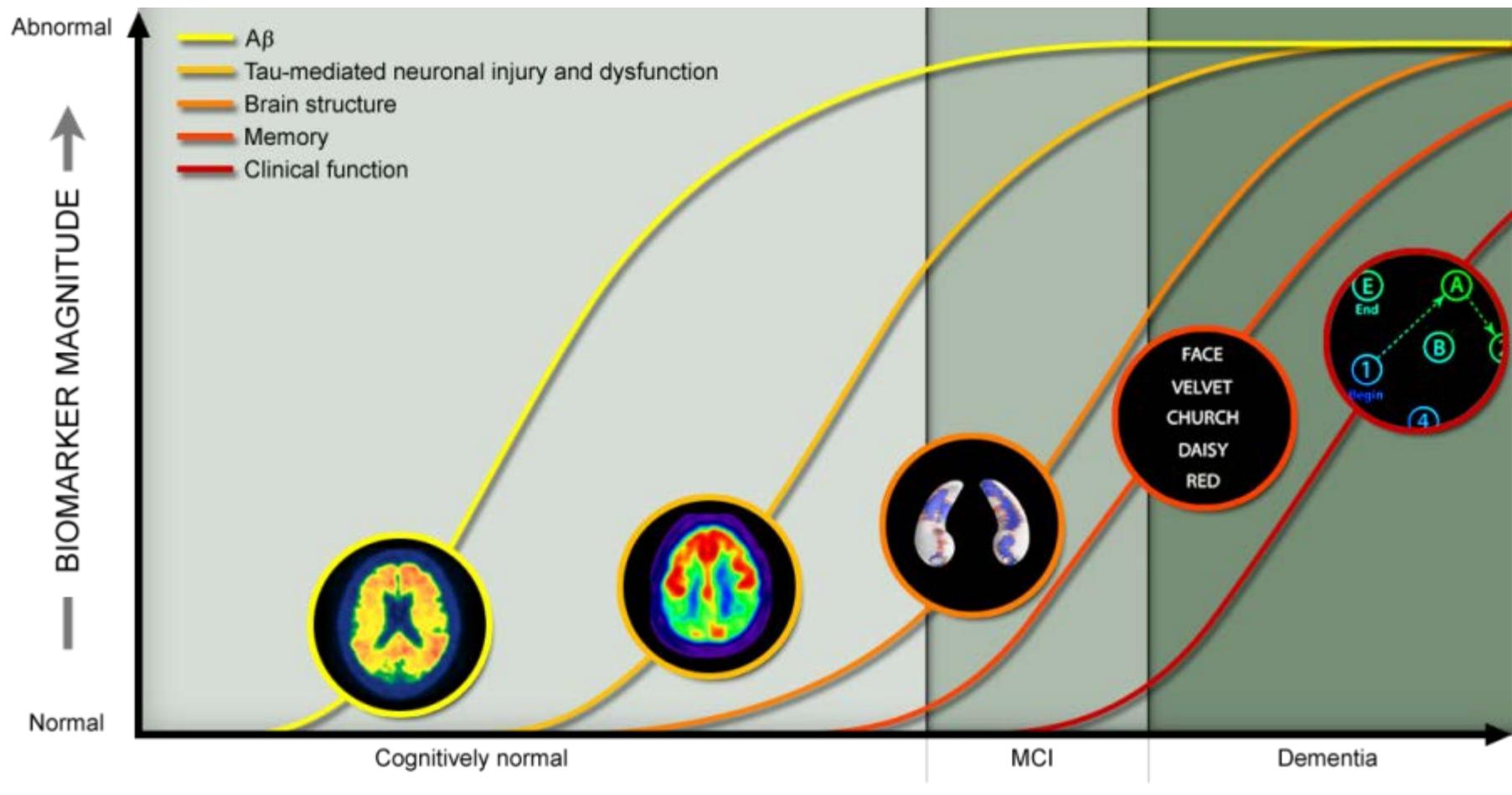
Saykin 2017



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*i*ADC

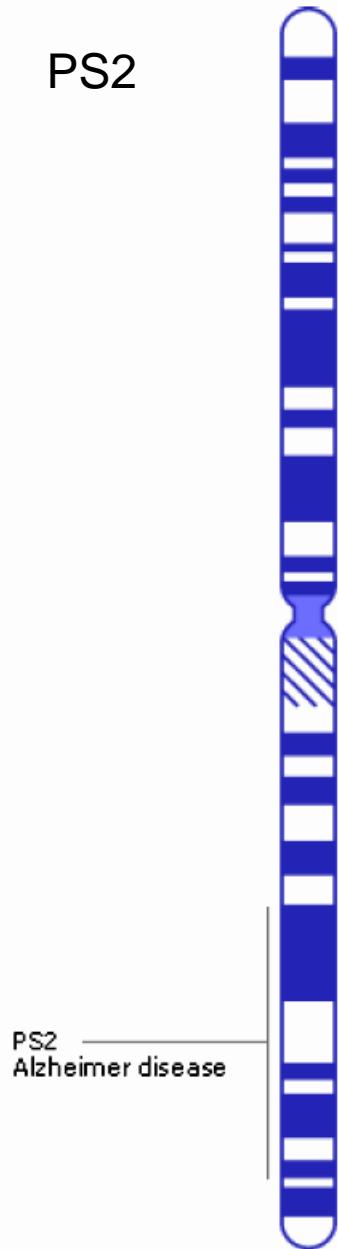
# Dynamic Aspects: Temporal Heterogeneity



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<http://adni.loni.usc.edu/study-design/background-rationale/>

PS2

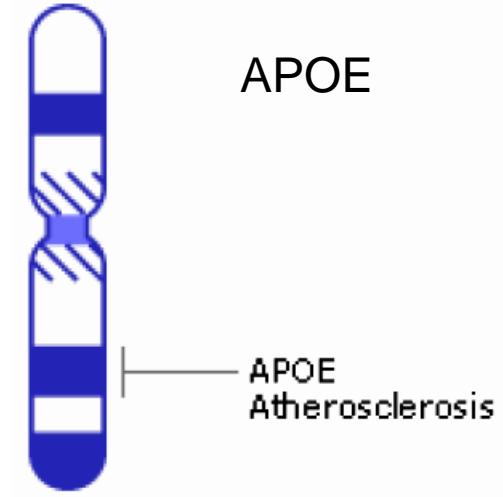


# Heritability

*LOAD: genetic factors account for ~60-80% of risk (Gatz et al 2006); APOE accounts for up to 50% (Ashford & Mortimer 2002); so up to 30% remains to be found.*



PS1



Chromosome 19

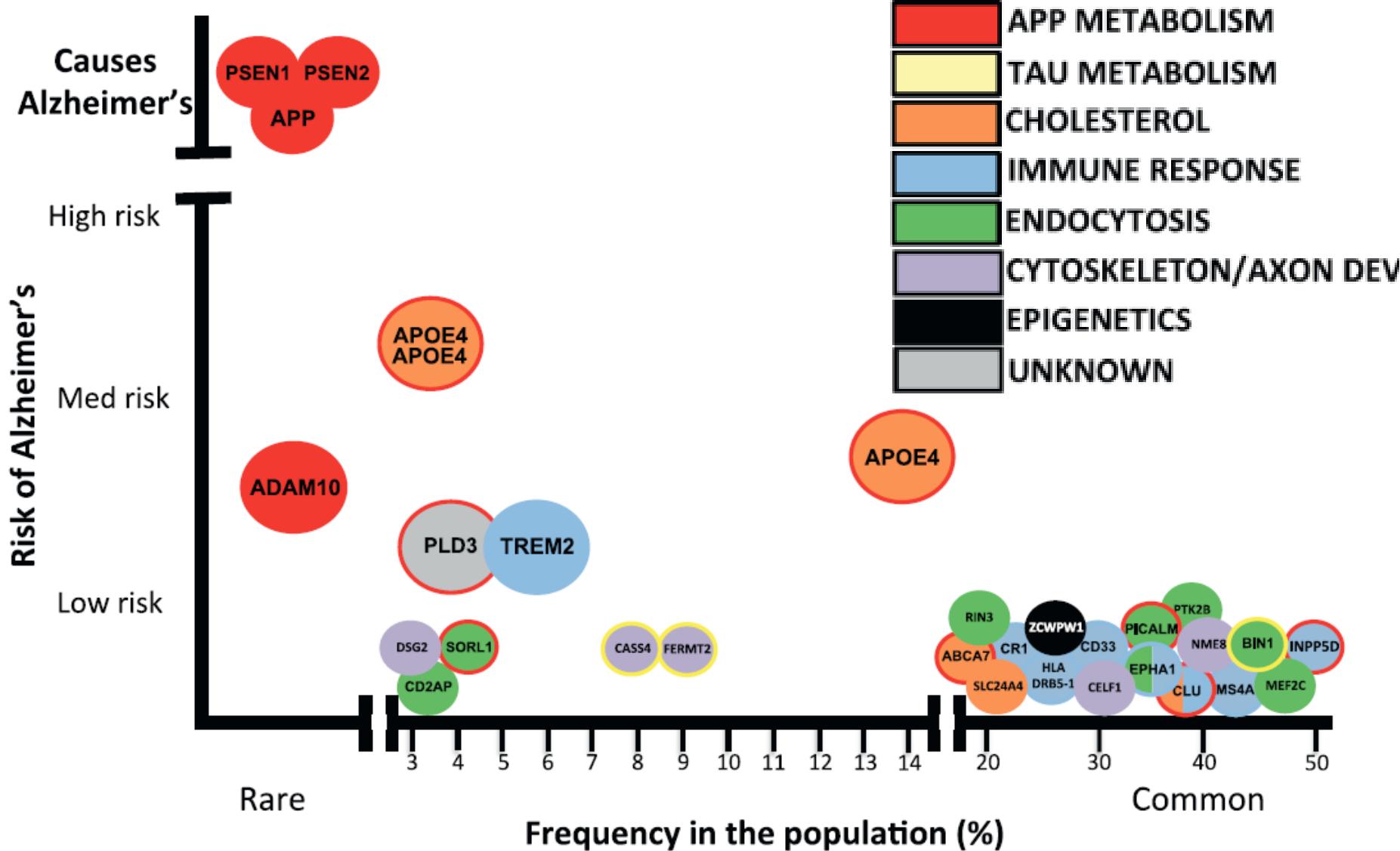


Chromosome 1

Chromosome 14

Chromosome 21

# Genetic Risk for AD: Many Pathways



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C. Karch & A. Goate, *Biol Psychiatry*  
2015; 77:43–51



# AD Cognitive Subtypes: Studies by Many Groups

Alzheimer's & Dementia ■ (2017) 1-11

**Alzheimer's  
&  
Dementia**

Featured Article

Cognitive subtypes of probable Alzheimer's disease robustly identified in four cohorts

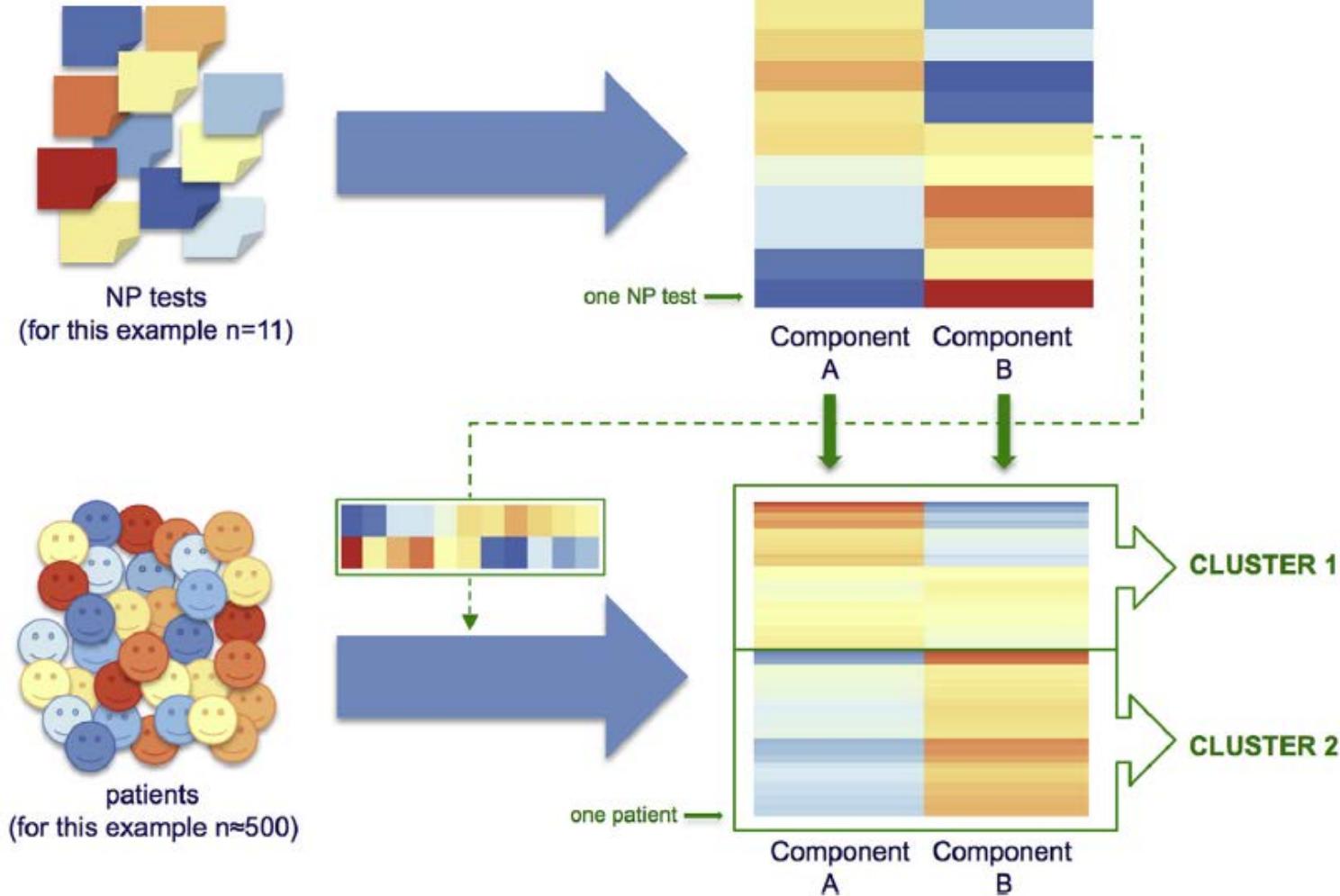
Nienke M. E. Scheltens<sup>a,\*</sup>, Betty M. Tijms<sup>a</sup>, Teddy Koene<sup>b</sup>, Frederik Barkhof<sup>c,d,e</sup>, Charlotte E. Teunissen<sup>f</sup>, Steffen Wolfsgruber<sup>g,h</sup>, Michael Wagner<sup>g,h</sup>, Johannes Kornhuber<sup>i</sup>, Oliver Peters<sup>j</sup>, Brendan I. Cohn-Sheehy<sup>k</sup>, Gil D. Rabinovici<sup>k</sup>, Bruce L. Miller<sup>k</sup>, Joel H. Kramer<sup>k</sup>, Philip Scheltens<sup>a</sup>, Wiesje M. van der Flier<sup>a,l</sup>, Alzheimer's Disease Neuroimaging Initiative<sup>l</sup>, German Dementia Competence Network, University of California San Francisco Memory and Aging Center, and Amsterdam Dementia Cohort



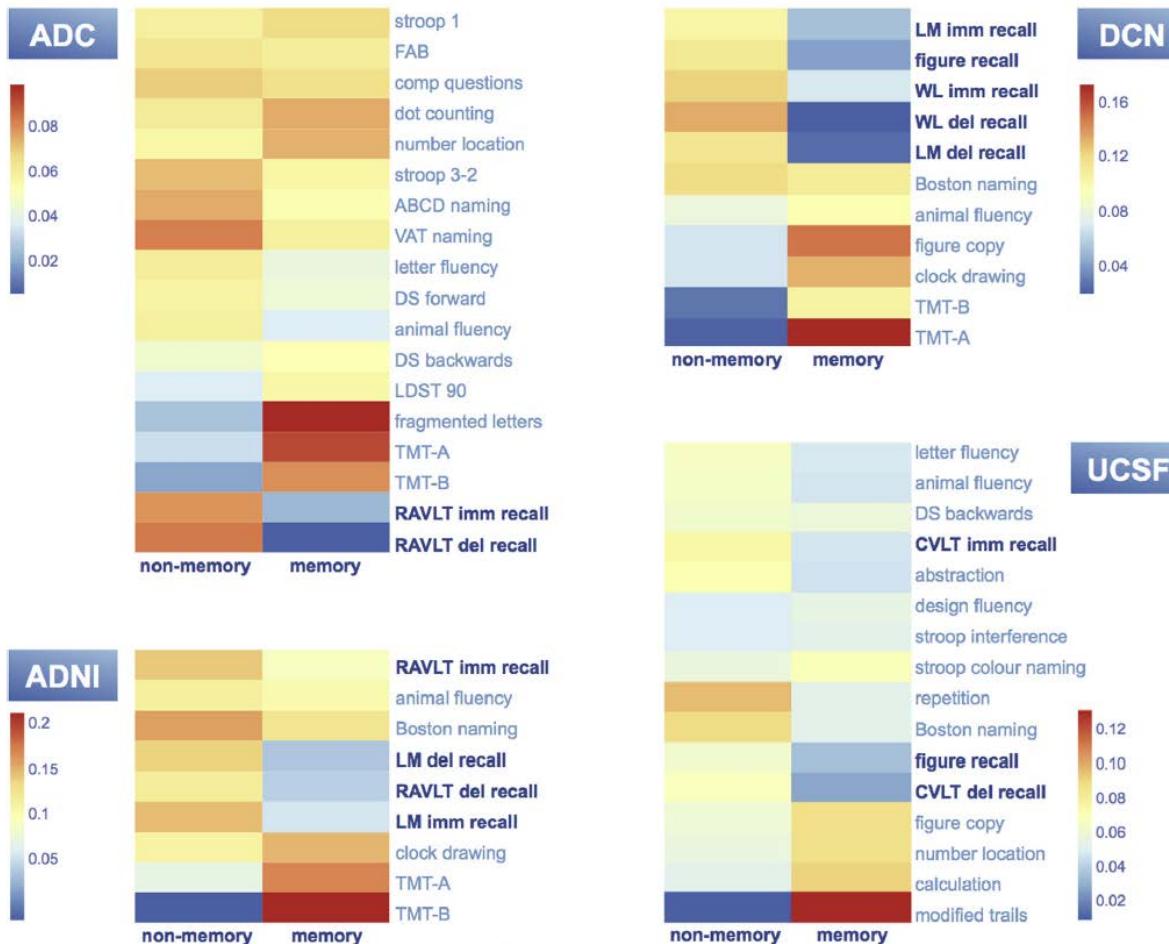
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N. Scheltens et al Alz & Dem 4/2017

# Cognitive Subtypes



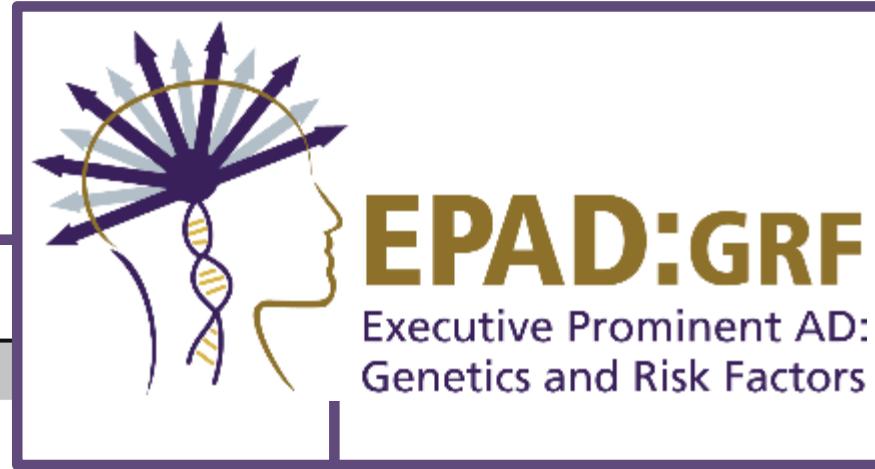
# Multiple tests and cohorts



# Genetic architecture of memory and executive functioning in AD

Brain Imaging and Behavior (2012) 6:649–660  
DOI 10.1007/s11682-012-9207-y

ADNI: FRIDAY HARBOR 2011 WORKSHOP SPECIAL ISSUE



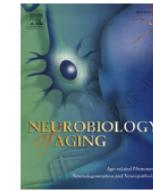
**Dysexecutive and amnesic AD subtypes defined  
by single indicator and modern psychometric approaches:  
relationships with SNPs in ADNI**

Shubhabrata Mukherjee • Emily Tritschuh •  
Laura E. Gibbons • R. Scott Mackin • Andrew Saykin •  
Paul K. Crane • for the Alzheimer's Disease  
Neuroimaging Initiative



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(P Crane R01 AG 042437)

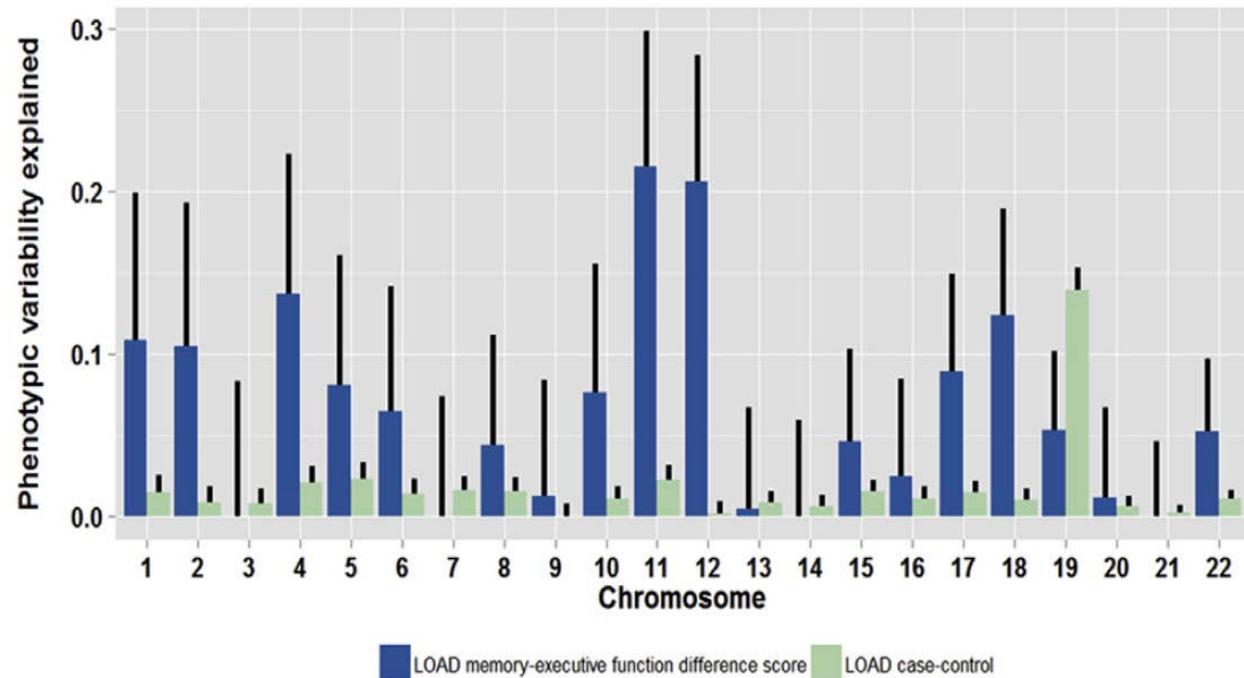


## The executive prominent/memory prominent spectrum in Alzheimer's disease is highly heritable



Jesse Mez<sup>a</sup>, Shubhabrata Mukherjee<sup>b</sup>, Timothy Thornton<sup>c</sup>, David W. Fardo<sup>d</sup>,  
Emily Tritschuh<sup>e</sup>, Sheila Sutti<sup>f</sup>, Richard Sherva<sup>g</sup>, John S. Kauwe<sup>h</sup>, Adam C. Naj<sup>i</sup>,  
Gary W. Beecham<sup>j</sup>, Alden Gross<sup>k</sup>, Andrew J. Saykin<sup>l</sup>, Robert C. Green<sup>f</sup>, Paul K. Crane<sup>b,\*</sup>,  
for Executive Prominent Alzheimer's Disease: Genetics and Risk Factors  
(EPAD:GRF), the Alzheimer's Disease Neuroimaging Initiative (ADNI1)<sup>1</sup>, and  
the Alzheimer's Disease Genetics Consortium (ADGC)

Subtypes  
are  
Heritable  
(0.68)



# Dynamic Aspects: Cognitive Trajectory



Alzheimer's & Dementia ■ (2013) 1–8

Alzheimer's  
&  
Dementia

## Genome-wide association study of the rate of cognitive decline in Alzheimer's disease

Richard Sherva<sup>a</sup>, Yorghos Tripodis<sup>b</sup>, David A. Bennett<sup>c</sup>, Lori B. Chibnik<sup>d,e,f</sup>, Paul K. Crane<sup>g</sup>, Philip L. de Jager<sup>d,e,f</sup>, Lindsay A. Farrer<sup>a,b,h</sup>, Andrew J. Saykin<sup>i</sup>, Joshua M. Shulman<sup>j</sup>, Robert C. Green<sup>k,\*</sup>, The GENAROADs Consortium, and The Alzheimer's Disease Neuroimaging Initiative



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# Genetics of Resilience

## ORIGINAL RESEARCH

### Gene-based GWAS and biological pathway analysis of the resilience of executive functioning

Shubhabrata Mukherjee • Sungeun Kim • Vijay K. Ramanan • Laura E. Gibbons •  
Kwang sik Nho • M. Maria Glymour • Nilüfer Ertekin-Taner • Thomas J. Montine •  
Andrew J. Saykin • Paul K. Crane • for the Alzheimer's Disease Neuroimaging Initiative

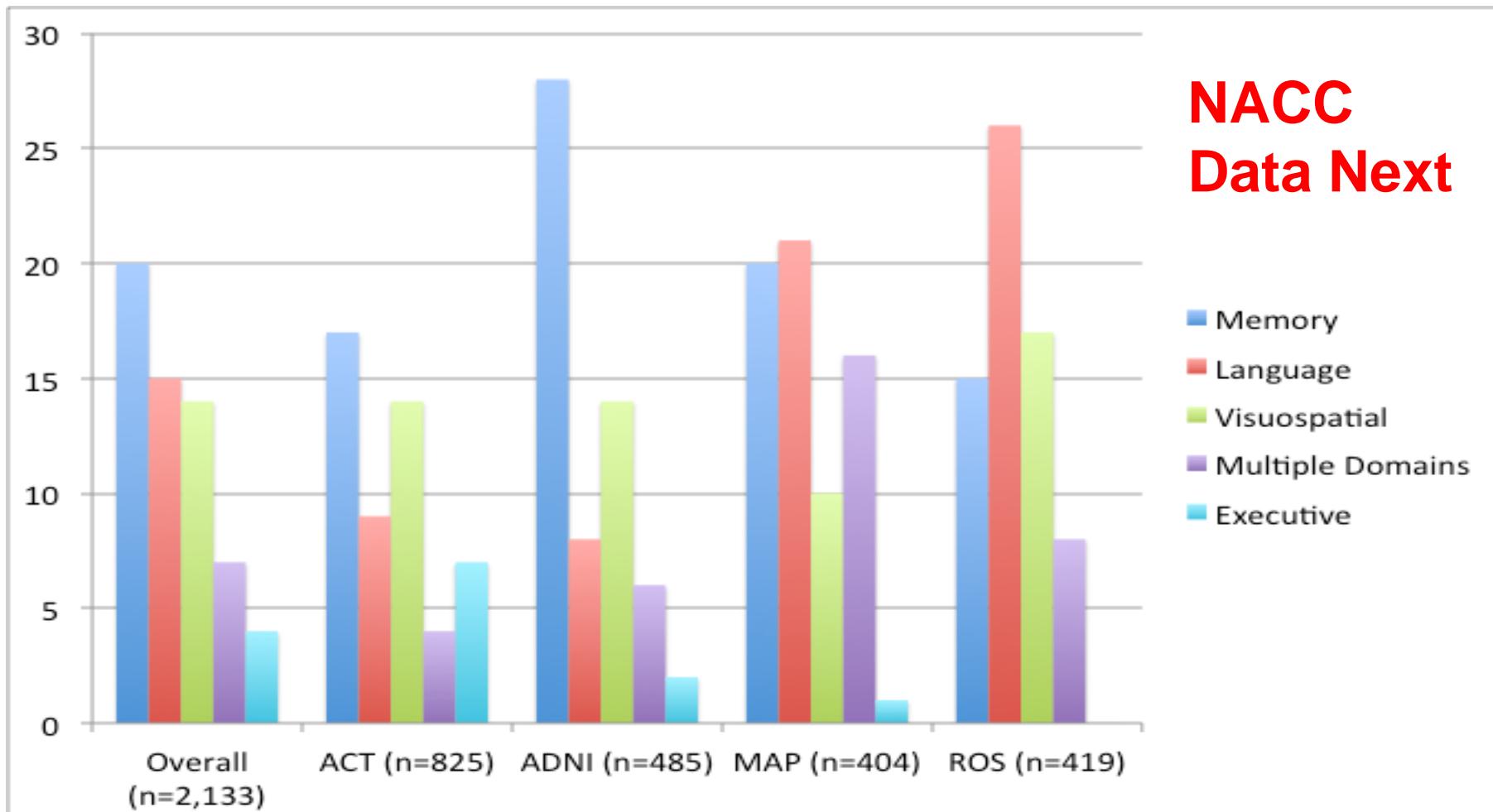
Searching  
for  
protective  
factors

Pathway (gene set) name	Set size <sup>a</sup>	Uncorrected P-value
Dendritic/Neuron spine	151 (131)	$1.27 \times 10^{-12}$
Presynaptic membrane	47 (42)	$8.68 \times 10^{-11}$
Postsynaptic density/ Dendritic spine head	111 (100)	$2.00 \times 10^{-10}$
Calcium ion transmembrane transporter activity	109 (104)	$3.75 \times 10^{-10}$
Ras guanyl-nucleotide exchange factor activity	93 (86)	$4.67 \times 10^{-10}$
Rho guanyl-nucleotide exchange factor activity	75 (68)	$9.33 \times 10^{-10}$
Calmodulin binding	161 (150)	$1.11 \times 10^{-9}$
Calcium channel activity	92 (89)	$1.89 \times 10^{-9}$
Guananyl-nucleotide exchange factor activity	167 (151)	$2.91 \times 10^{-9}$
Cell adhesion molecule binding	52 (46)	$5.06 \times 10^{-9}$
Synaptic membrane	204 (179)	$9.49 \times 10^{-9}$
Divalent inorganic cation transmembrane transporter activity	129 (120)	$3.21 \times 10^{-8}$
Transmembrane receptor protein tyrosine phosphatase activity	18 (18)	$3.53 \times 10^{-8}$
Regulation of phospholipase C activity	65 (61)	$5.22 \times 10^{-8}$
Voltage-gated ion channel activity	177 (156)	$5.41 \times 10^{-8}$
Positive regulation of phospholipase C activity	64 (60)	$5.54 \times 10^{-8}$
Chloride channel activity	72 (60)	$8.36 \times 10^{-8}$
Axon part	121 (106)	$8.48 \times 10^{-8}$
Synapse organization	83 (71)	$1.03 \times 10^{-7}$
cAMP metabolic process	32 (30)	$1.38 \times 10^{-7}$

# Cognitively-defined subgroups

(P Crane R01 AG 042437)

NACC  
Data Next



- Memory most common overall, followed by language
- Isolated substantial language deficits quite marked in MAP and especially ROS
- Too few with isolated substantial executive functioning deficits for genetic analyses
- Multiple domains more common in MAP (especially) and ROS than in ADNI or ACT
  - Likely heterogeneous: ignoring for genetic analyses

# *APOE*: Proportion with $\geq 1 \varepsilon 4$ alleles

Study	Overall	None	Memory	Language	Visuospatial	Multiple	Executive	Total n	p
ACT	34	35	47	25	30	31	20	711	0.005
ADNI	64	66	74	55	55	46	58	485	0.021
MAP	34	33	45	26	24	40	33	386	0.10
ROS	36	34	47	42	38	36	29	393	0.15
Total	42	42	56	31	38	39	27	1975	<0.001

lower by 10%	
lower by 5%	p>0.05
within 5%	p<0.05
higher by 5%	p<0.01
higher by 10%	p<0.0025

# Genetics of Subtypes: IGAP SNP Results

Gene	MAF	OR	ACT	ROS/MAP	ADNI	Meta	P(Meta)	P(Hetero)
<i>SORL1</i> *	0.04	1.30						
<i>BIN1</i>	0.41	1.22						
<i>CR1</i>	0.20	1.18						
<i>CLU</i> *	0.38	1.16						
<i>ABCA7</i>	0.19	1.15						
<i>PICALM</i> *	0.36	1.15						
<i>FERMT2</i>	0.09	1.14						
<i>CASS4</i> *	0.08	1.14						
<i>MS4A6A</i> *	0.40	1.11						
<i>EPHA1</i> *	0.34	1.11						
<i>HLA-DRB5-HLA-DRB1</i>	0.28	1.11						
<i>PTK2B</i>	0.37	1.10						
<i>CD2AP</i>	0.27	1.10						
<i>ZCWPW1</i> *	0.29	1.10						
<i>SLC24A4-RIN3</i> *	0.22	1.10						
<i>INPP5D</i>	0.49	1.08						
<i>CELF1</i>	0.32	1.08						
<i>NME8</i>	0.37	1.08						
<i>MEF2C</i> *	0.41	1.08						
<i>CD33</i> *	0.31	1.06						
			Case					
			Control					

Paul Crane et al, unpublished data

# No domain with prominent deficits

Gene	MAF	OR	ACT	ROS/MAP	ADNI	Meta	P(Meta)	P(Het)
<i>SORL1</i> *	0.04	1.30	0.97	1.38	-	1.11	0.60	0.40
<i>BIN1</i>	0.41	1.22	1.25	1.03	1.17	1.16	0.042	0.56
<i>CR1</i>	0.2	1.18	1.12	1.36	1.06	1.18	0.058	0.47
<i>CLU</i> *	0.38	1.16	0.89	1.28	1.18	1.14	0.084	0.15
<i>ABCA7</i>	0.19	1.15	1.20	1.40	1.31	1.28	0.004	0.76
<i>PICALM</i> *	0.36	1.15	1.11	1.32	1.06	1.16	0.031	0.40
<i>FERMT2</i>	0.09	1.14	1.04	1.02	1.19	1.08	0.51	0.83
<i>CASS4</i> *	0.08	1.14	1.10	0.99	1.40	1.16	0.22	0.48
<i>MS4A6A</i> *	0.4	1.11	1.07	1.11	1.16	1.11	0.13	0.89
<i>EPHA1</i> *	0.34	1.11	0.98	0.94	1.05	0.99	0.87	0.83
<i>HLA-DRB5-HLA-DRB1</i>	0.28	1.11	0.90	1.20	-	1.05	0.61	0.10
<i>PTK2B</i>	0.37	1.10	1.28	0.98	0.85	1.03	0.64	0.042
<i>CD2AP</i>	0.27	1.10	1.11	1.07	1.26	1.14	0.08	0.66
<i>ZCWPW1</i> *	0.29	1.10	1.01	1.30	1.19	1.15	0.058	0.32
<i>SLC24A4-RIN3</i> *	0.22	1.10	1.32	1.08	1.13	1.18	0.042	0.54
<i>INPP5D</i>	0.49	1.08	1.06	1.02	1.21	1.09	0.19	0.57
<i>CELF1</i>	0.32	1.08	1.09	1.11	0.94	1.05	0.47	0.59
<i>NME8</i>	0.37	1.08	0.88	0.89	0.94	0.90	0.11	0.91
<i>MEF2C</i> *	0.41	1.08	1.20	1.30	1.11	1.20	0.010	0.68
<i>CD33</i> *	0.31	1.06	1.27	0.96	1.07	1.09	0.22	0.23
		Case	223	227	246	696		
		Control	1407	887	331	2625		
							OR <	OR >
							0.80	1.25
							0.67	1.50
							0.57	1.75
							0.50	2.00
							p(meta)	p(het)
							0.05	0.05
							0.01	0.01
							0.0025	0.0025

Paul Crane et al, unpublished data

# Isolated substantial memory deficits

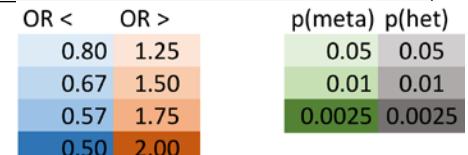
Gene	MAF	OR	ACT	ROS/MAP	ADNI	Meta	P(Meta)	P(Hetero)
<i>SORL1</i> *	0.04	1.30	2.27	0.94	-	1.17	0.59	0.20
<i>BIN1</i>	0.41	1.22	1.05	1.29	0.84	0.99	0.93	0.17
<i>CR1</i>	0.20	1.18	1.56	1.16	1.45	1.36	0.005	0.53
<i>CLU</i> *	0.38	1.16	0.97	1.12	1.07	1.07	0.48	0.90
<i>ABCA7</i>	0.19	1.15	1.16	0.98	1.27	1.17	0.17	0.70
<i>PICALM</i> *	0.36	1.15	1.38	1.20	1.35	1.31	0.003	0.80
<i>FERMT2</i>	0.09	1.14	1.41	1.36	1.69	1.49	0.003	0.77
<i>CASS4</i> *	0.08	1.14	1.24	1.02	2.15	1.44	0.024	0.12
<i>MS4A6A</i> *	0.40	1.11	1.34	0.91	1.49	1.21	0.028	0.033
<i>EPHA1</i> *	0.34	1.11	1.39	1.15	1.00	1.13	0.22	0.38
<i>HLA-DRB5-HLA-DRB1</i>	0.28	1.11	0.93	1.10	-	1.03	0.84	0.49
<i>PTK2B</i>	0.37	1.10	1.18	0.98	0.95	1.02	0.80	0.58
<i>CD2AP</i>	0.27	1.10	1.06	0.99	1.16	1.08	0.46	0.78
<i>ZCWPW1</i> *	0.29	1.10	1.63	1.24	1.33	1.37	0.001	0.55
<i>SLC24A4-RIN3</i> *	0.22	1.10	1.27	1.04	1.03	1.10	0.36	0.68
<i>INPP5D</i>	0.49	1.08	1.12	1.11	1.30	1.19	0.040	0.66
<i>CELF1</i>	0.32	1.08	1.01	1.10	1.05	1.06	0.55	0.94
<i>NME8</i>	0.37	1.08	1.12	1.04	0.91	1.01	0.90	0.62
<i>MEF2C</i> *	0.41	1.08	1.42	1.54	1.15	1.32	0.003	0.39
<i>CD33</i> *	0.31	1.06	1.02	1.06	1.15	1.08	0.39	0.87
	Case	82	112	179	373			
	Control	1407	887	331	2625			



Paul Crane et al, unpublished data

# Isolated substantial language impairment

Gene	MAF	OR	ACT	ROS/MAP	ADNI	Meta	P(Meta)	P(Het)
<i>SORL1</i> *	0.04	1.30	0.66	0.88	-	0.82	0.43	0.64
<i>BIN1</i>	0.41	1.22	0.90	1.03	1.00	0.99	0.95	0.91
<i>CR1</i>	0.2	1.18	1.47	1.53	1.63	1.54	<0.001	0.97
<i>CLU</i> *	0.38	1.16	0.94	0.87	1.54	0.99	0.89	0.09
<i>ABCA7</i>	0.19	1.15	1.00	1.07	0.93	1.01	0.92	0.93
<i>PICALM</i> *	0.36	1.15	1.18	1.13	0.86	1.07	0.51	0.52
<i>FERMT2</i>	0.09	1.14	1.27	0.99	1.35	1.10	0.58	0.72
<i>CASS4</i> *	0.08	1.14	1.02	1.03	1.14	1.05	0.77	0.97
<i>MS4A6A</i> *	0.4	1.11	1.17	0.93	1.00	0.99	0.90	0.69
<i>EPHA1</i> *	0.34	1.11	0.81	0.97	0.81	0.89	0.29	0.72
<i>HLA-DRB5-HLA-DRB1</i>	0.28	1.11	0.65	0.88	-	0.83	0.14	0.35
<i>PTK2B</i>	0.37	1.10	1.46	1.11	0.97	1.13	0.25	0.44
<i>CD2AP</i>	0.27	1.10	2.16	1.10	1.38	1.42	0.001	0.022
<i>ZCWPW1</i> *	0.29	1.10	0.64	1.04	0.81	0.89	0.29	0.21
<i>SLC24A4-RIN3</i> *	0.22	1.10	1.00	0.86	1.35	0.96	0.71	0.33
<i>INPP5D</i>	0.49	1.08	1.09	0.83	1.47	0.99	0.95	0.06
<i>CELF1</i>	0.32	1.08	0.84	1.08	0.96	1.01	0.92	0.66
<i>NME8</i>	0.37	1.08	0.79	1.08	0.72	0.94	0.54	0.21
<i>MEF2C</i> *	0.41	1.08	1.15	1.03	1.33	1.11	0.33	0.67
<i>CD33</i> *	0.31	1.06	0.90	1.20	1.02	1.10	0.35	0.54
	Case	41	163	48	252			
	Control	1407	887	331	2625			



Paul Crane et al, unpublished data

# Isolated substantial visuospatial impairment

Gene	MAF	OR	ACT	ROS/MAP	ADNI	Meta	P(Meta)	P(Het)
<i>SORL1</i> *	0.04	1.3	1.79	1.06	-	1.25	0.52	0.47
<i>BIN1</i>	0.41	1.22	1.24	1.26	1.03	1.14	0.23	0.69
<i>CR1</i>	0.2	1.18	1.55	1.18	1.84	1.45	0.002	0.29
<i>CLU</i> *	0.38	1.16	0.66	0.80	1.18	0.87	0.21	0.13
<i>ABCA7</i>	0.19	1.15	1.30	0.74	1.21	1.12	0.43	0.34
<i>PICALM</i> *	0.36	1.15	0.92	1.34	1.20	1.16	0.14	0.32
<i>FERMT2</i>	0.09	1.14	1.55	0.59	0.72	0.89	0.53	0.09
<i>CASS4</i> *	0.08	1.14	1.60	0.67	1.06	0.95	0.77	0.11
<i>MS4A6A</i> *	0.4	1.11	1.04	1.16	1.18	1.13	0.24	0.88
<i>EPHA1</i> *	0.34	1.11	0.83	1.08	0.81	0.87	0.20	0.56
<i>HLA-DRB5-HLA-DRB1</i>	0.28	1.11	1.01	1.14	-	1.09	0.54	0.65
<i>PTK2B</i>	0.37	1.1	0.84	0.97	1.04	0.96	0.67	0.73
<i>CD2AP</i>	0.27	1.1	1.38	1.20	1.41	1.32	0.012	0.79
<i>ZCWPW1</i> *	0.29	1.1	0.99	0.87	1.63	1.07	0.58	0.08
<i>SLC24A4-RIN3</i> *	0.22	1.1	1.33	0.82	0.85	0.93	0.54	0.24
<i>INPP5D</i>	0.49	1.08	1.04	1.21	0.89	1.04	0.70	0.47
<i>CELF1</i>	0.32	1.08	0.77	0.91	0.85	0.85	0.14	0.84
<i>NME8</i>	0.37	1.08	1.35	1.18	1.12	1.20	0.08	0.78
<i>MEF2C</i> *	0.41	1.08	1.21	1.78	1.04	1.28	0.031	0.13
<i>CD33</i> *	0.31	1.06	1.29	1.27	1.32	1.29	0.020	0.99
		Case	61	88	84	233		
		Control	1407	887	331	2625		



Paul Crane et al, unpublished data

# Summary of genetic results (meta-analysis)

Gene	MAF	OR	No Domain	Memory	Visuospatial	Language
<i>SORL1</i> *	0.04	1.30	1.11	1.17	1.25	0.82
<i>BIN1</i>	0.41	1.22	<b>1.16</b>	0.99	1.14	0.99
<i>CR1</i>	0.20	1.18	1.18	<b>1.36</b>	<b>1.45</b>	<b>1.54</b>
<i>CLU</i> *	0.38	1.16	1.14	1.07	0.87	0.99
<i>ABCA7</i>	0.19	1.15	<b>1.28</b>	1.17	1.12	1.01
<i>PICALM</i> *	0.36	1.15	<b>1.16</b>	<b>1.31</b>	1.16	1.07
<i>FERMT2</i>	0.09	1.14	1.08	<b>1.49</b>	0.89	1.10
<i>CASS4</i> *	0.08	1.14	1.16	<b>1.44</b>	0.95	1.05
<i>MS4A6A</i> *	0.40	1.11	1.11	<b>1.21*</b>	1.13	0.99
<i>EPHA1</i> *	0.34	1.11	0.99	1.13	0.87	0.89
<i>HLA-DRB5-HLA-DRB1</i>	0.28	1.11	1.05	1.03	1.09	0.83
<i>PTK2B</i>	0.37	1.10	1.03	1.02	0.96	1.13
<i>CD2AP</i>	0.27	1.10	1.14	1.08	<b>1.32</b>	<b>1.42*</b>
<i>ZCWPW1</i> *	0.29	1.10	1.15	<b>1.37</b>	1.07	0.89
<i>SLC24A4-RIN3</i> *	0.22	1.10	<b>1.18</b>	1.10	0.93	0.96
<i>INPP5D</i>	0.49	1.08	1.09	<b>1.19</b>	1.04	0.99
<i>CELF1</i>	0.32	1.08	1.05	1.06	0.85	1.01
<i>NME8</i>	0.37	1.08	0.90	1.01	1.20	0.94
<i>MEF2C</i> *	0.41	1.08	<b>1.20</b>	<b>1.32</b>	<b>1.28</b>	1.11
<i>CD33</i> *	0.31	1.06	1.09	1.08	<b>1.29</b>	1.10
		Case	696	373	233	252
		Control	2625	2625	2625	2625

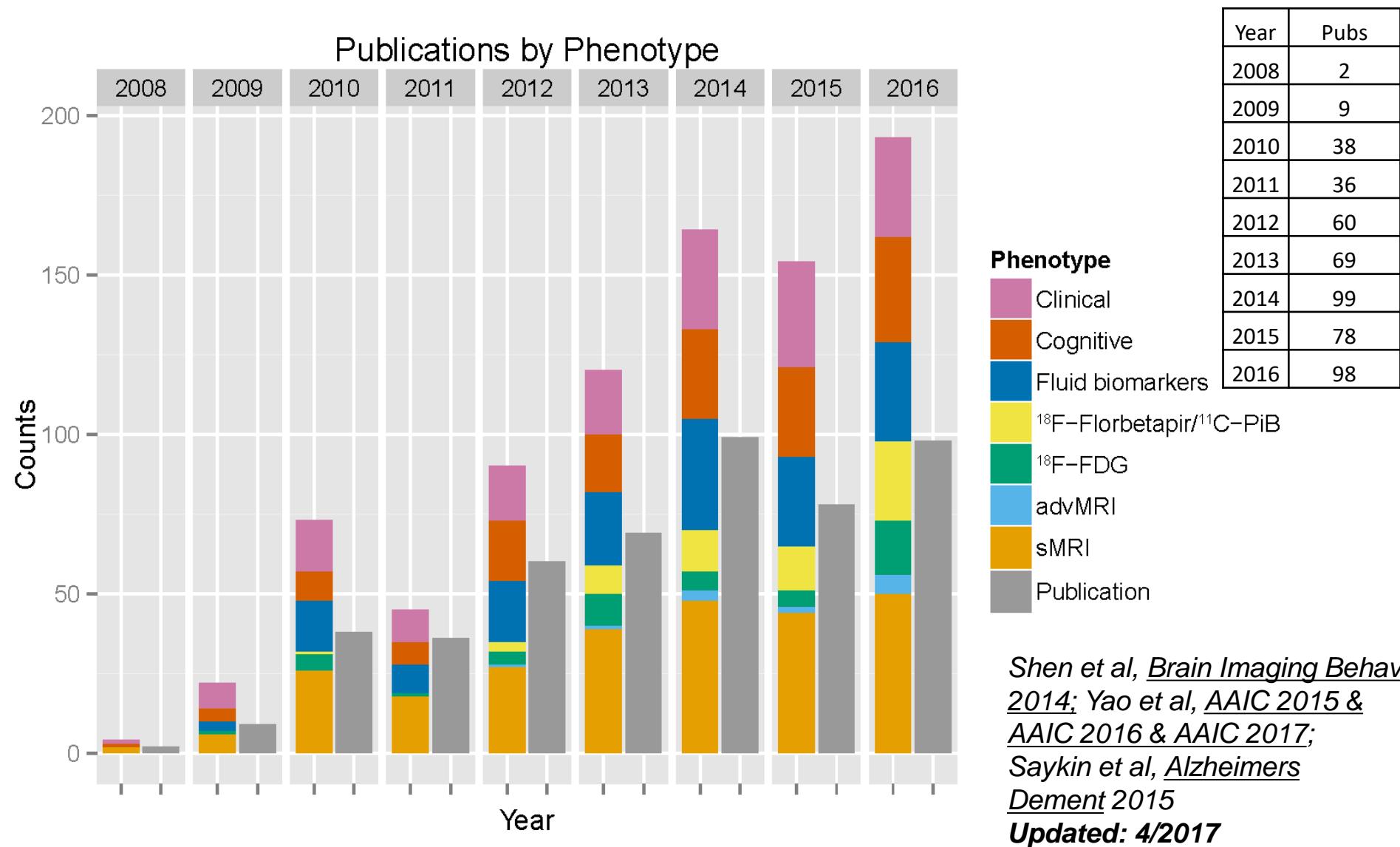


p>0.05  
 p<0.05  
**p<0.01**  
**p<0.0025**

\* Het p<0.05

# More Heterogeneity: Genetics of Quantitative Endophenotypes:

*Publications Using ADNI Genetic Data (2008–2016)*

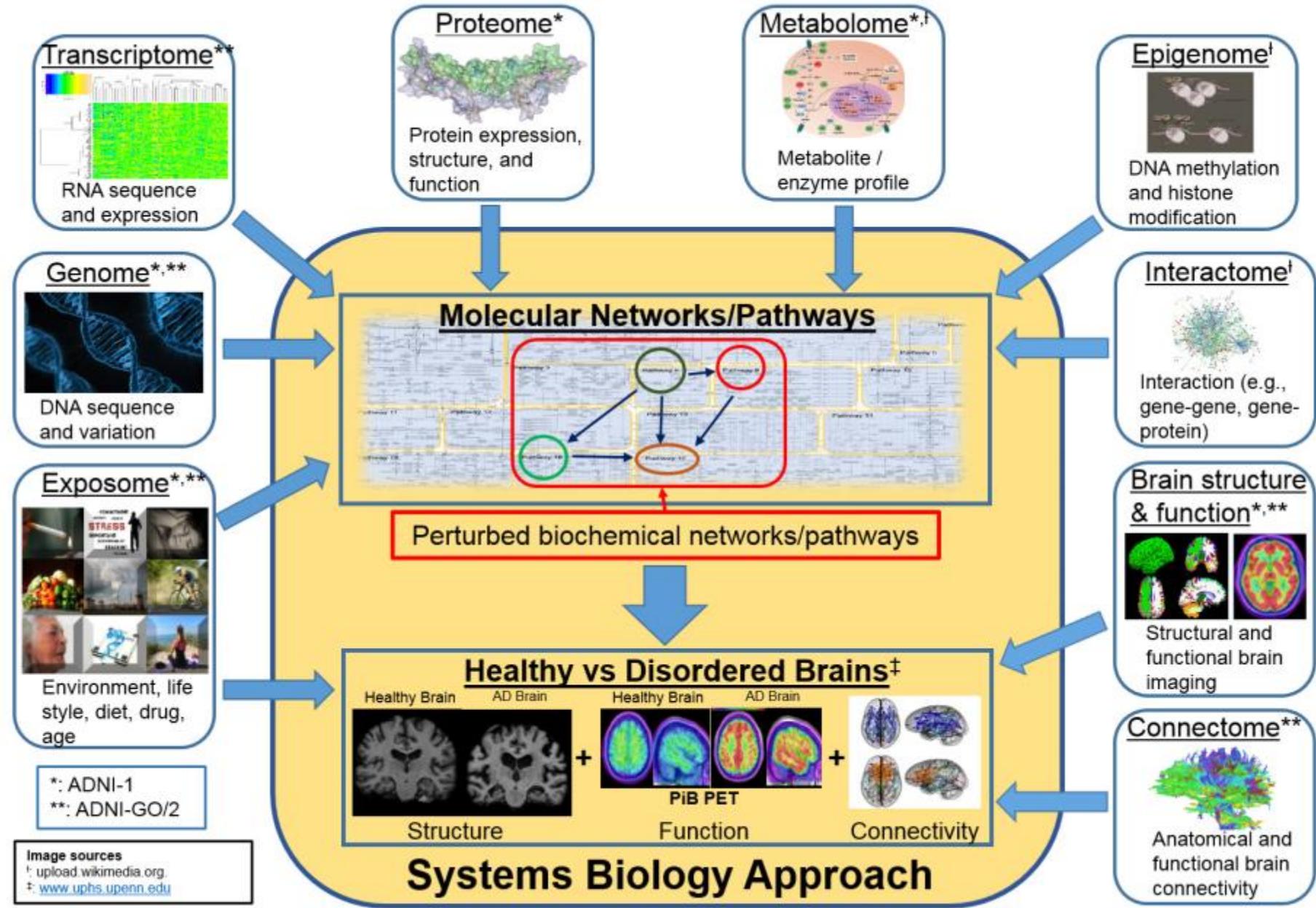


# Role for Polygenic Risk Scores

- Mormino, E.C., et al., *Polygenic risk of Alzheimer disease is associated with early- and late-life processes*. Neurology, 2016. **87**(5): p. 481-8.
- Hohman, T.J., et al., *Discovery of gene-gene interactions across multiple independent data sets of late onset Alzheimer disease from the Alzheimer Disease Genetics Consortium*. Neurobiol Aging, 2016. **38**: p. 141-50.
- Gaiteri, C., et al., *Genetic variants in Alzheimer disease - molecular and brain network approaches*. Nat Rev Neurol, 2016. **12**(7): p. 413-27.
- Yokoyama, J.S., et al., *Decision tree analysis of genetic risk for clinically heterogeneous Alzheimer's disease*. BMC Neurol, 2015. **15**: p. 47.
- Martiskainen, H., et al., *Effects of Alzheimer's disease-associated risk loci on cerebrospinal fluid biomarkers and disease progression: a polygenic risk score approach*. J Alzheimers Dis, 2015. **43**(2): p. 565-73.
- Escott-Price, V., et al., *Common polygenic variation enhances risk prediction for Alzheimer's disease*. Brain, 2015. **138**(Pt 12): p. 3673-84.
- Desikan, R.S., et al., *Genetic assessment of age-associated Alzheimer disease risk: Development and validation of a polygenic hazard score*. PLoS Med, 2017. **14**(3): p. e1002258.



# Working toward a Systems Biology of AD



# From Noise to Signal: Modeling Heterogeneity

## Interacting Domains   Biomarkers   Moderators   Outcomes

Baseline Cognitive Status

Report & Testing

### Moderators

Neural Activity & Connectivity

Task & RS fMRI

- Age
- Education
- Sex
- Genetics
  - APOE, other
  - Family Hx
- Reserve
  - Brain
  - Cognitive
- Lifestyle
  - Exercise
  - Cognitive
  - Diet
- Environment
- Medications

Amyloid Burden

PET & CSF

Tau Burden

PET & CSF



Microvascular Pathology

WMHI, MH, CBF

Neurodegeneration

MRI & DTI

Inflammation & Related Processes

Fluid Biomarkers

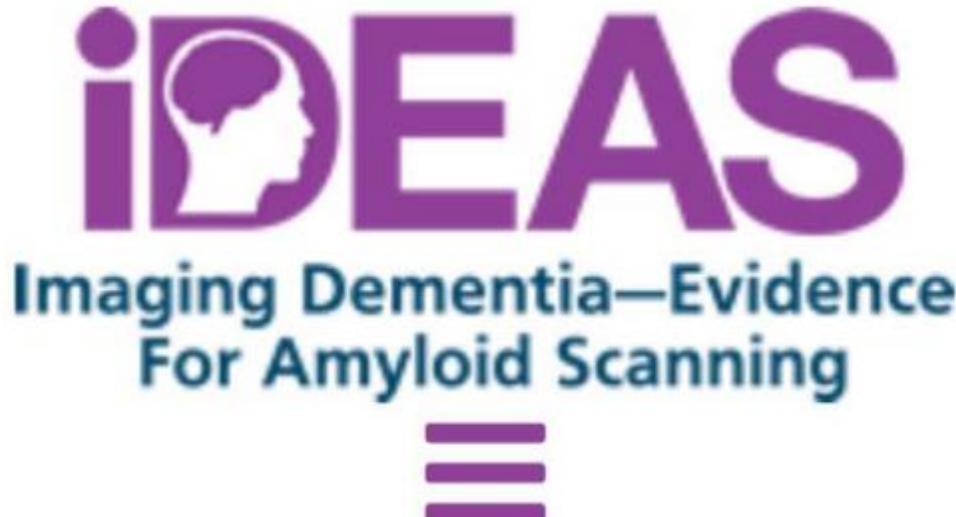
Longitudinal Progression:

Cognitive Changes

Clinical Status

MRI & Biomarker Changes

\* WMHI: white matter hyperintensities; MH: microhemorrhages; CBF: cerebral blood flow



- CMS coverage for amyloid imaging with Evidence Development
- Trial sponsored by the Alzheimer's Association
- Managed by the American College of Radiology (ACR) and American College of Radiology Imaging Network (ACRIN)
- 18,500 patients with cognitive impairment & unclear diagnosis
- **IU site (Apostolova)**
- **Genetics add-on study led by IU (Foroud & Saykin)**
  - Remote consent and saliva kits for DNA (NCRAD) & Analyses (Imaging Genomics Lab)



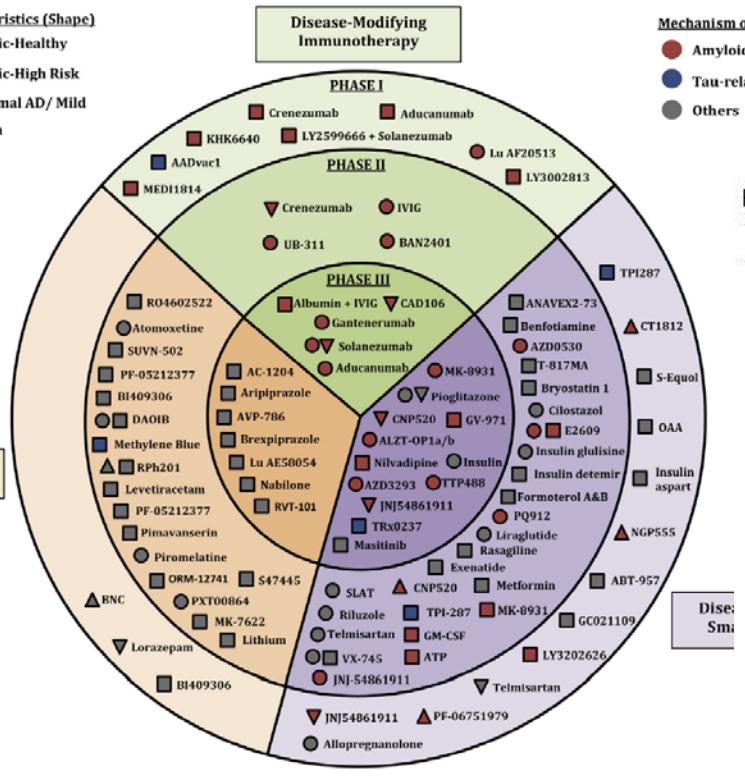
SCHOOL OF MEDICINE

<http://www.ideas-study.org/>

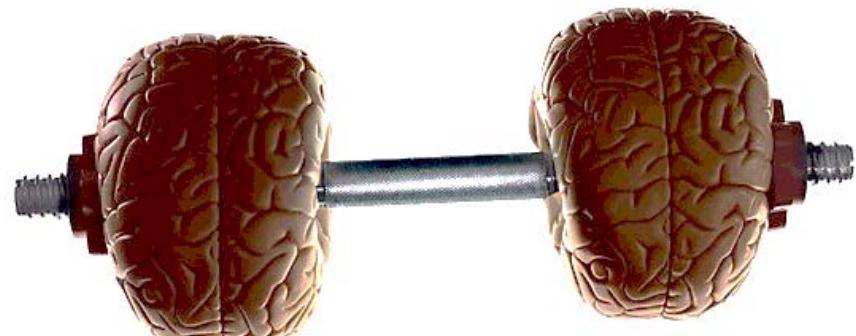
# Relevance for Interventions

**Subject Characteristics (Shape)**

- △ Asymptomatic-Healthy
- ▽ Asymptomatic-High Risk
- MCI / Prodromal AD / Mild
- AD Dementia



PHYS ED  
Lobes of Steel



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*Cummings et al, Alzheimer's & Dementia:  
Translational Research & Clinical  
Interventions 2 (2016) 222-232*

# Summary & Discussion

- Heterogeneity is multidimensional with several axes – clinical, neuropathological & genetic
- Memory prominent – *APOE+* canonical AD pathology
- Heterogeneity is dynamic – time is another dimension
  - Phenotypes; gene expression, epigenetic modifications, etc.
- Hopefully we can turn “noise” into signal -> modeling
  - Understand fundamental disease mechanisms and
  - Tailor therapeutics with real “precision”
- How can the ADCs best contribute to resolving issues of heterogeneity?

