



Future challenges in VCI

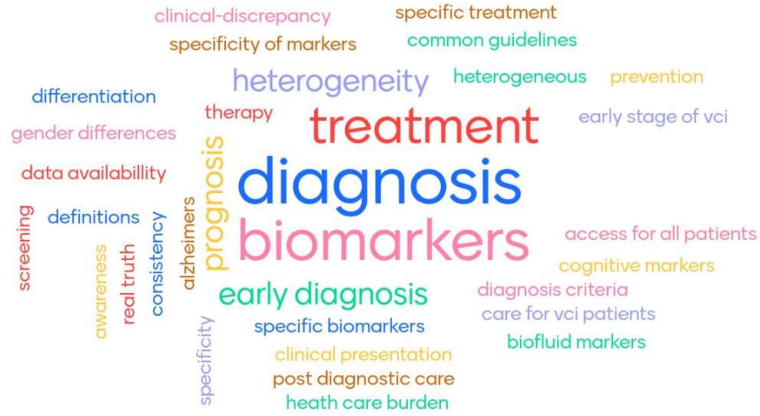
Geert Jan Biessels
Vascular Cognitive Impairment Group
Department of Neurology, UMC Utrecht, The Netherlands



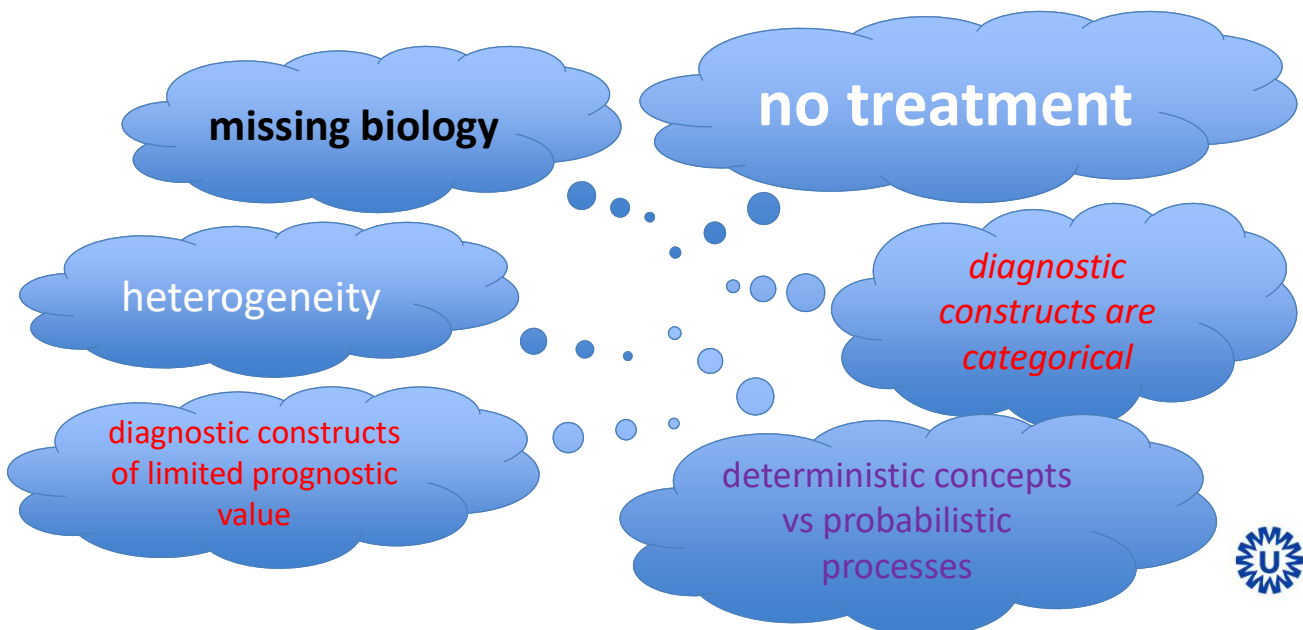
Challenges in VCI > what's your view?



What are the challenges in VCI
56 responses



Challenges in VCI > my "word cloud"



Diagnosing and studying VCI

- take a step back on current criteria and markers
- what we can do today
- future perspectives



Vascular dementia: diagnostic criteria

NINDS-AIREN criteria

I. Criteria for the clinical diagnosis of PROBABLE vascular dementia include all of the following:

- Dementia defined by cognitive decline from a previous level of functioning and manifested by impairment of two or more cognitive domains (orientation, attention, memory, visuospatial functions, executive functions, motor functions, or praxis), preferably established by clinical examination and documented with neuropsychologic testing; decline must be enough to interfere with activities of daily living and not be the effects of stroke alone.
- Exclusion criteria: cases with disturbance of consciousness, psychosis, severe aphasia, or other brain disorders precluding neuropsychologic testing or other brain disorders that themselves could account for the dementia.
- Cerebrovascular disease, defined by a history of stroke, as determined by neurologic examination, such as Babinski sign, sensory deficit, homonymous hemianopia, or relevant CVD by brain imaging showing multiple large vessel infarcts or a single strategic infarct involving the thalamus, basal forebrain, or multiple basal ganglia and white matter, or periventricular white matter lesions.
- A relationship between the above criteria and the dementia is inferred by the presence of or absence of dementia within 3 months following the onset of stroke or progression of cognitive decline.

II. Clinical features consistent with the diagnosis of PROBABLE vascular dementia include the following:

- Early presence of a gait disturbance (small-step gait or marche à petits pas)

essence:

- establish clinical syndrome
- show vascular pathology
- assume no other causes



Vascular dementia: diagnostic criteria

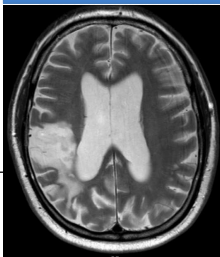
more inclusive:

- acquired cognitive impairment
- vascular disease is a likely cause

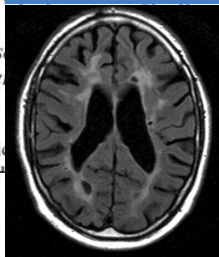
AHA/ASA Scientific Statement

Vascular Contributions to Cognitive Impairment and Dementia

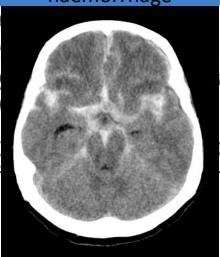
carotid dissection > infarct



small vessel disease



aneurysmal subarachnoid haemorrhage



- all VCI
- fundamental differences in
 - ✓ etiology/biology
 - ✓ treatment
 - ✓ prognosis

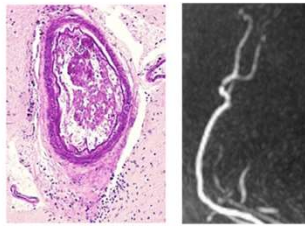


studying, diagnosing & treating VCI – current status

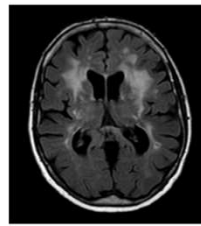
risk factors



vascular disease processes



tissue injury



cognition

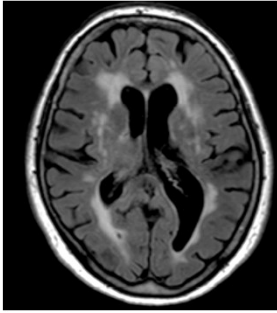


diagnostic info



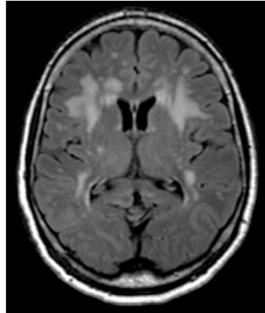
MRI & diagnosis VCI due to SVD

woman 83
MCI



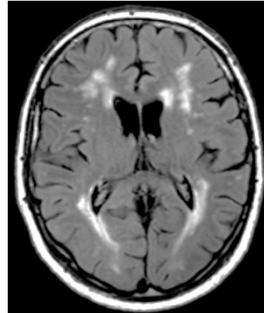
Dx: VCI due to SVD

woman 62
mild cognitive
decrement



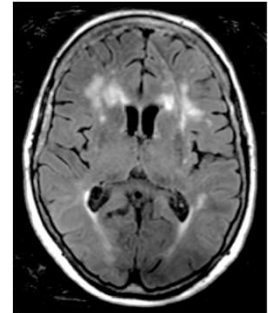
Dx: cognitive
decrement due to SVD

man 75
dementia



Dx: Alzheimer's disease with
vascular component

woman 73
cognitively intact



Healthy volunteer
research project

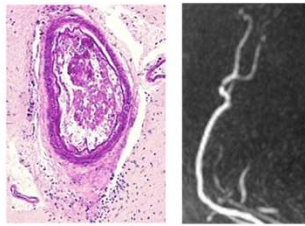


studying, diagnosing & treating VCI – current status

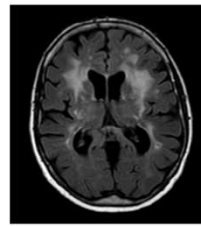
risk factors



vascular disease processes



tissue injury



cognition



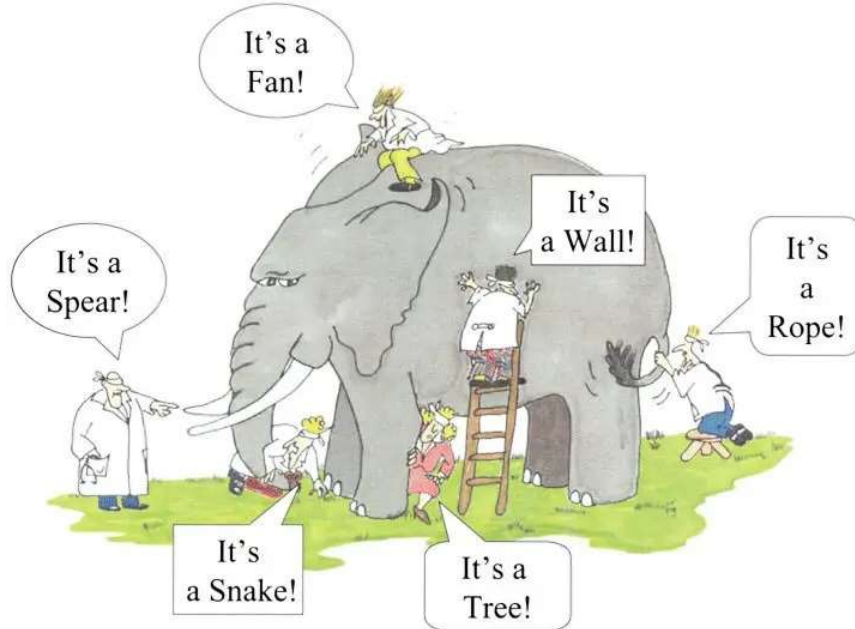
diagnostic info



assumptions



VCI – what's in a name....




VCI – what's in a name....


Fortunately no AD..
This doctor knows what she is talking about..
Can I be treated?
What will the future bring?
.....

I checked everything
I followed the guidelines
Patient meets the criteria
My colleagues will understand my diagnosis
.....





ELSEVIER




CrossMark

Alzheimer's & Dementia 14 (2018) 535-562


**Alzheimer's
&
Dementia**

2018 National Institute on Aging—Alzheimer's Association (NIA-AA) Research Framework
**NIA-AA Research Framework: Toward a biological definition
of Alzheimer's disease**

Clifford R. Jack, Jr.,^{a,*}
Samantha Budd Haeberlein^f



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Check for updates

Alzheimer's & Dementia 15 (2019) 158-167

**Alzheimer's
&
Dementia**

where is the
"V"??

AT(N) biomarker groupin

A: Aggregated A β or asso
CSF A β_{42} , or A β_{42} /A β_{40}
Amyloid PET

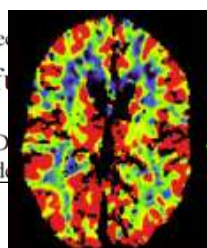
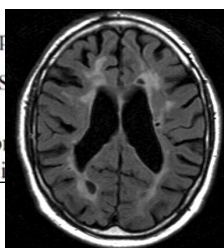
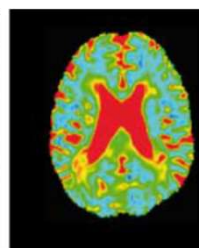
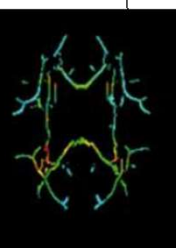
T: Aggregated tau (neurof
CSF phosphorylated tau
Tau PET


(N): Neurodegeneration or
Anatomic MRI
FDG PET
CSF total tau

Spe


Vascular dysf

Melanie D
Lon S. Schneid



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Alzheimer's & Dementia 14 (2018) 535-562


**Alzheimer's
&
Dementia**

2018 National Institute on Aging—Alzheimer's Association (NIA-AA) Research Framework
**NIA-AA Research Framework: Toward a biological definition
of Alzheimer's disease**

Clifford R. Jack, Jr.,^{a,*} David A. Bennett^b, Kaj
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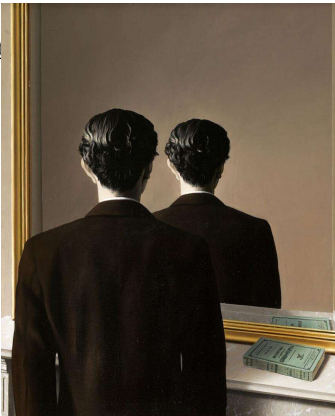



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Check for updates

toward biological
definitions of VCI



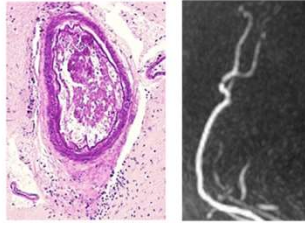


VCI – developments

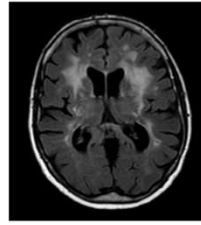
risk factors



vascular disease processes



tissue injury



cognition



novel markers of disease processes



- genetics
- circulating biomarkers

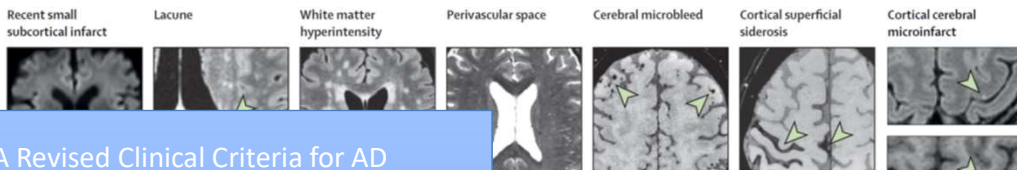


- imaging markers



potential for novel imaging markers

updated STRIVE criteria



NIA-AA Revised Clinical Criteria for AD



- Core AD biomarkers
- Biomarkers that are non-specific but important in AD pathogenesis
- Biomarkers of common non-AD co-pathologies

NIH-NCATS biomarker framework:

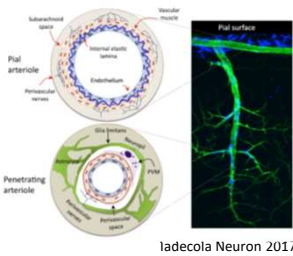
- Susceptibility/risk biomarkers
- Diagnostic biomarkers
- Monitoring biomarkers
- Prognostic biomarkers
-

Duering et al Lancet Neurology 2023

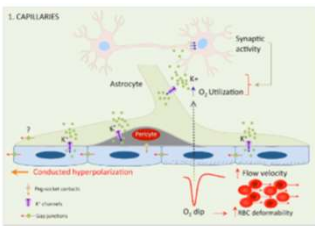
(novel) VCI biomarker? consider biology, biomarker goal



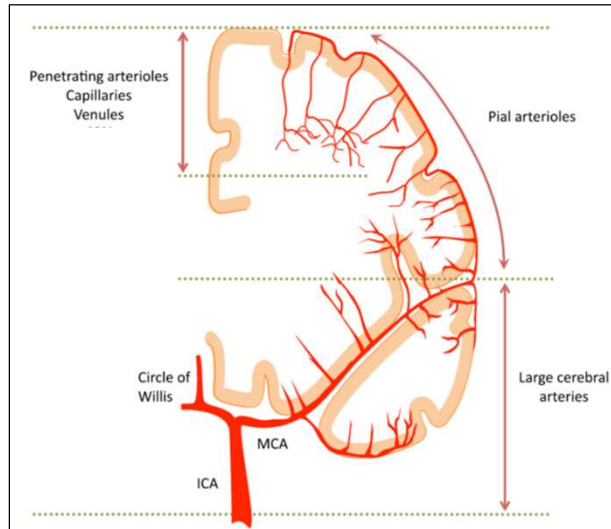
neuroscience & clinic of small vessel disease: developments & translational gaps



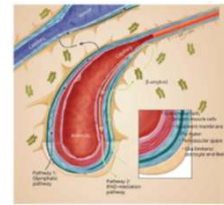
Iadecola Neuron 2017



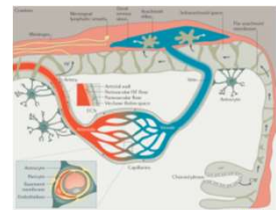
Neurovascular coupling



Iadecola Neuron 2017



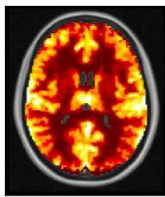
pervascular spaces – brain clearance



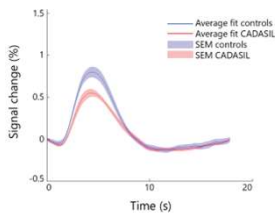
BBB



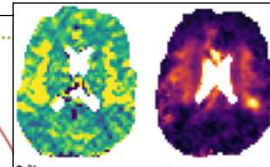
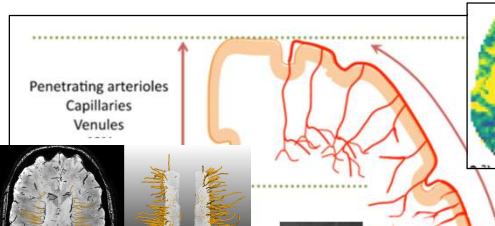
translational gap in small vessel disease: opportunities for (7T) MRI



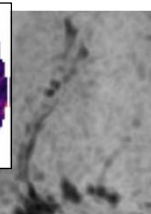
Cerebrovascular reactivity



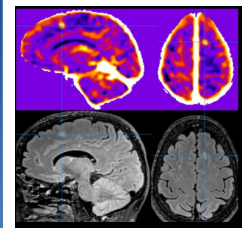
Neurovascular coupling



3D cardiac strain



pervascular spaces – brain clearance



BBB



application in SVD:

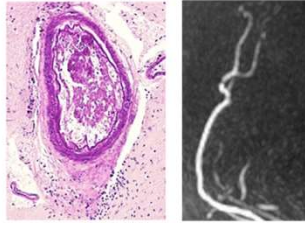
- early stages
- rapid development
- emerging patterns of differential vessel involvement – different diseases

VCI – developments

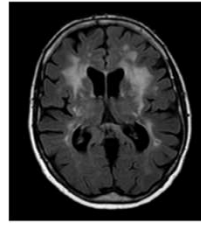
risk factors



vascular disease processes



tissue injury



cognition



novel markers of disease processes



- genetics
- circulating biomarkers



- imaging markers

novel markers of functional impact



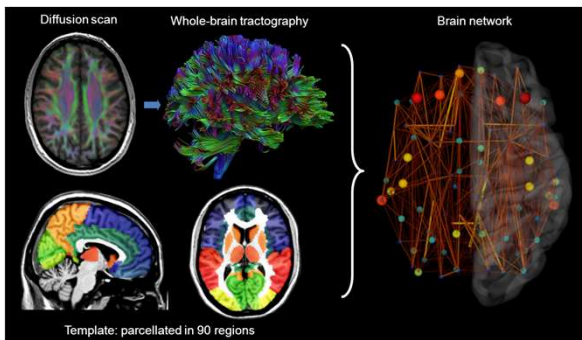
- connectomics
- lesion pattern analyses



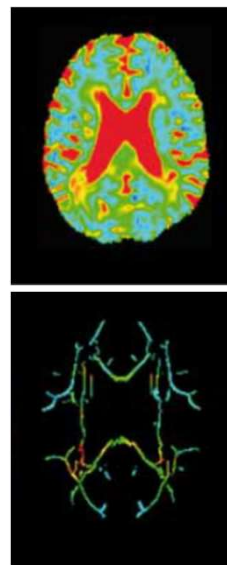
Markers of cognitive impact of vascular injury

diffusion MR

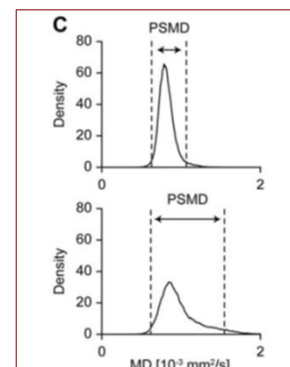
connectomics



Reijmer, Neurology, 2013



peak width of skeletonized mean diffusivity [PSMD]



Baykara, Annals Neurol 2016



Markers of cognitive impact of vascular injury

lesion patterns – strategic lesions

special article

Vascular dementia: Diagnostic criteria for research studies

Report of the NINDS-AIREN International Workshop*

G.C. Román, MD; T.K. Tatemichi, MD; T. Erkinjuntti, MD; J.L. Cummings, MD; J.C. Masdeu, MD; J.H. Garcia, MD; L. Amaducci, MD; J.-M. Orgogozo, MD; A. Brun, MD; A. Hofman, MD, PhD; D.M. Moody, MD; M.D. O'Brien, MD; T. Yamaguchi, MD; J. Grafman, PhD; B.P. Drayer, MD; D.A. Bennett, MD; M. Fisher, MD; J. Ogata, MD; E. Kokmen, MD; F. Bermejo, MD; P.A. Wolf, MD; P.B. Gorelick, MD; K.L. Bick, PhD; A.K. Pajean, MD; M.A. Bell, DPhil; C. DeCarli, MD; A. Culebras, MD; A.D. Korczyn, MD; J. Bogousslavsky, MD; A. Hartmann, MD; and P. Scheinberg, MD

Neurology 1993

mostly from case studies
comprehensive map
lacking

Table 1. Brain imaging lesions associated with vascular dementia

I. Topography

Radiologic lesions associated with dementia include ANY of the following or combinations thereof:

1. Large-vessel strokes in the following territories:

Bilateral anterior cerebral artery

Posterior cerebral artery, including paramedian thalamic infarctions, inferior medial temporal lobe lesions

Association areas: parietotemporal, temporo-occipital territories (including angular gyrus)

Watershed carotid territories: superior frontal, parietal regions



lesion symptom mapping

MetaVCI Map consortium - <https://metavcimap.org/>



aim: “to perform meta-analyses on strategic lesion locations for VCI using LSM.”

Approach: “integration of data from different cohorts to increase sample sizes, to improve brain lesion coverage and support comprehensive LSM studies”



lesion symptom mapping – MetaVCIMap.org

Strategic infarct locations for post-stroke cognitive impairment: a pooled analysis of individual patient data from 12 acute ischaemic stroke cohorts



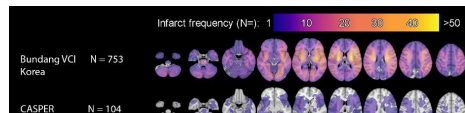
Nick A Weaver, Hugo J Kuijff, Hugo P Aben, Jill Abrigo, Hee-Joon Bae, Mélanie Barbay, Jonathan G Best, Régis Bordet, Francesca M Chappell, Christopher P L H Chen, Thibaut Dondaine, Ruben S van der Giessen, Olivier Godefroy, Bibek Gyanwali, Olivia K L Hamilton, Saima Hilal, Irene M C Huenges Wajer, Yeonwook Kang, L Jaap Kappelle, Beom Joon Kim, Sebastian Köhler, Paul L M de Kort, Peter J Koudstaal, Gregory Kuchcinski, Bonnie Y K Lam, Byung-Chul Lee, Keon-Joo Lee, Jae-Sung Lim, Renaud Lopes, Stephen D J Makin, Anne-Marie Mendyk, Vincent C T Mok, Mi Sun Oh, Robert J van Oostenbrugge, Martine Roussel, Lin Shi, Julie Staals, Maria del C Valdés-Hernández, Narayanaswamy Venketasubramanian, Frans R J Verhey, Joanna M Wardlaw, David J Werring, Xu Xin, Kyung-Ho Yu, Martine J E van Zandvoort, Lei Zhao, J Matthijs Biesbroek, Geert Jan Biessels

Summary

Background Post-stroke cognitive impairment (PSCI) occurs in approximately half of people in the first year after stroke. Infarct location is a potential determinant of PSCI, but a comprehensive map of strategic infarct locations Lancet Neurol 2021
Published Online

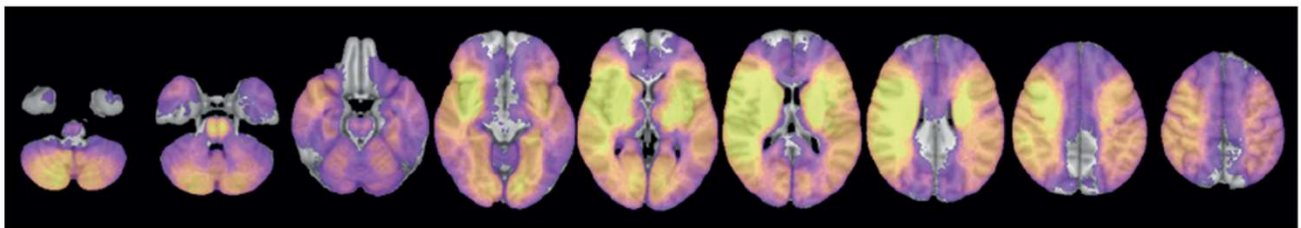


results:



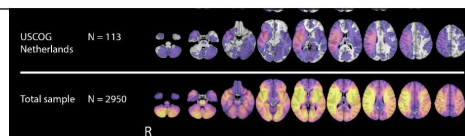
Z=-47 -35 -23 -11 1 13 25 37 49

A Lesion prevalence: total sample (n=2950)



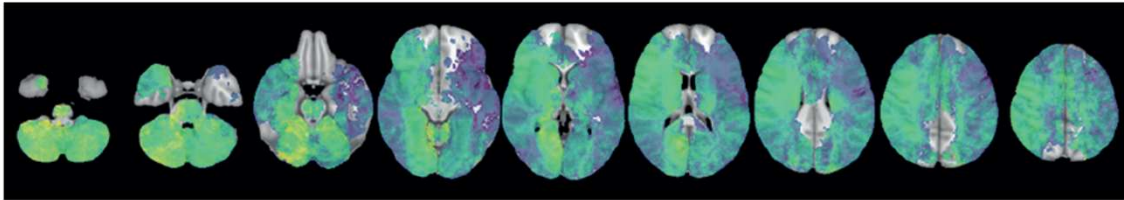
Infarct frequency (n=) 5 10 20 30 40 >50

lesion coverage 86.9%
of brain voxels

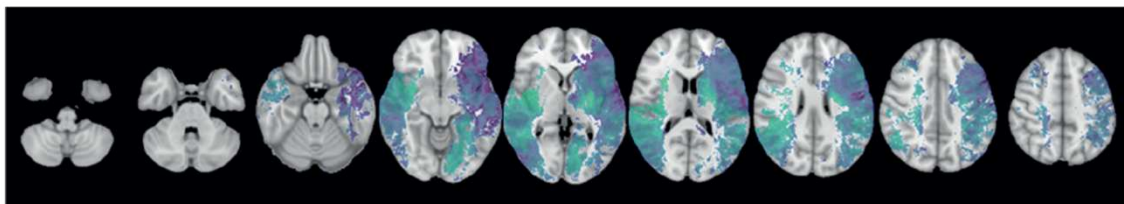


results:

B ORs for PSCI: total sample, all tested voxels (n=2950)



C ORs for PSCI: total sample, significant voxels (n=2950; FDR q<0.01)

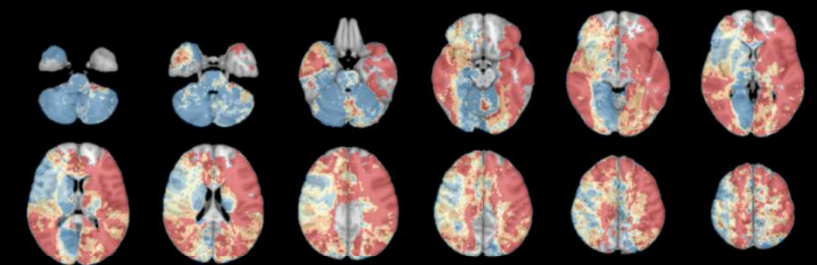
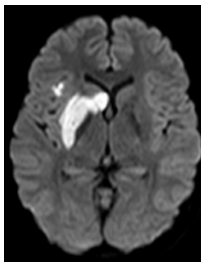


OR=



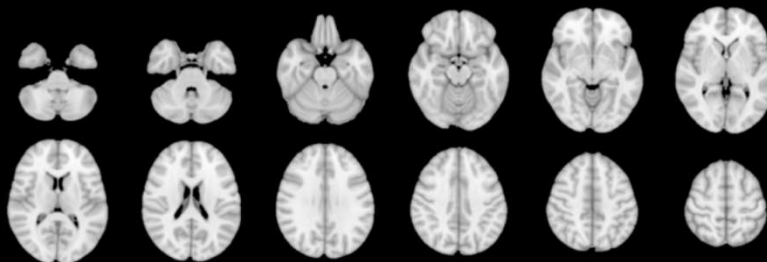
Location impact score (based on average color within infarct)

1	2	3	4	5
(30% PSCI)	(36% PSCI)	(39% PSCI)	(47% PSCI)	(66% PSCI)

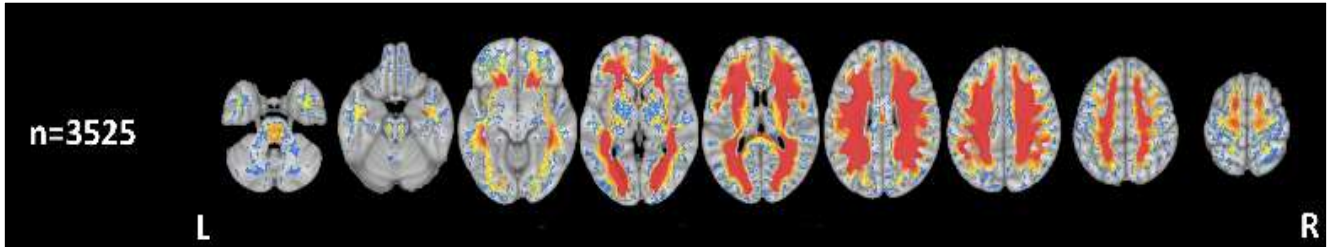


R ————— L

Empty brain template for comparison of brain structures



lesion symptom mapping – MetaVCIMap.org

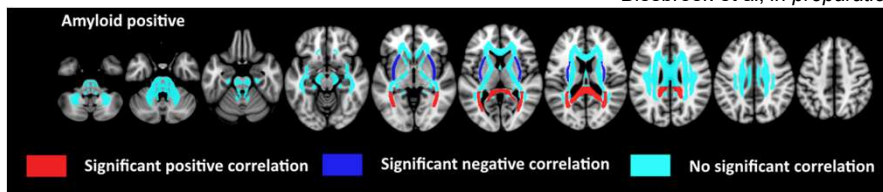


WMH: memory clinic (11 cohorts, 3525 patients)

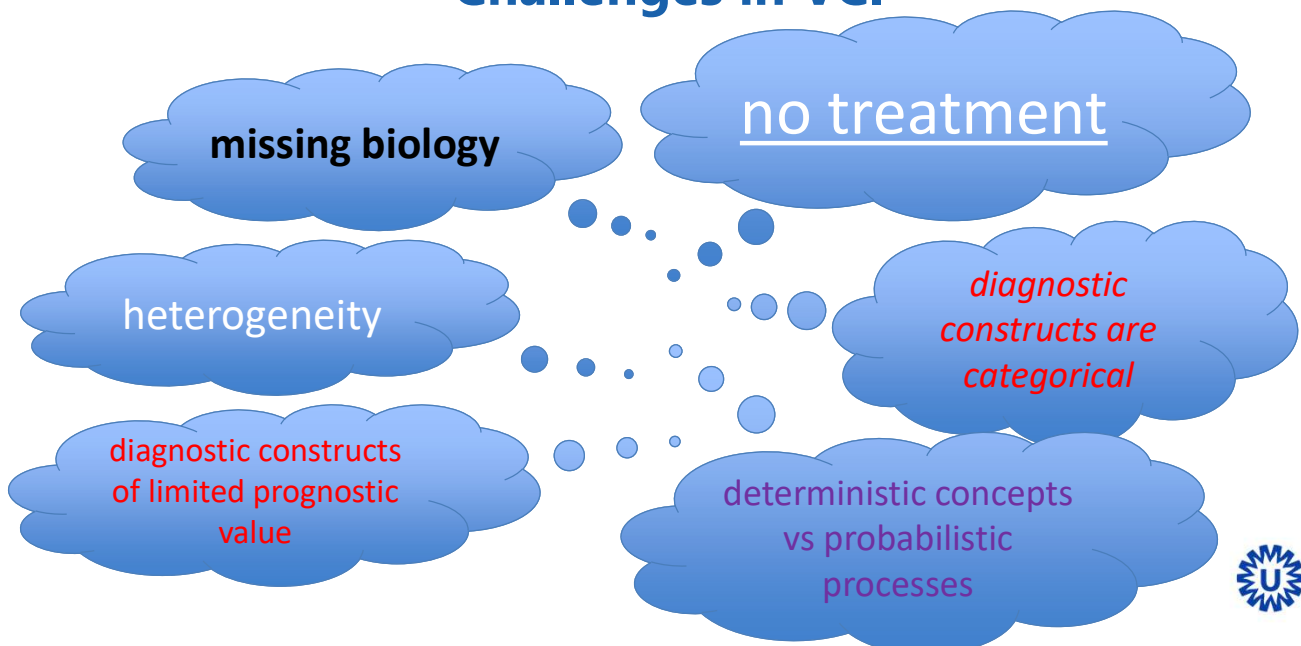
Coenen, Alz&Dem 2023

- strategic WMH score based on four key tracts inversely correlated with cognitive performance

Biesbroek et al, *in preparation*

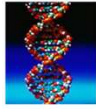


Challenges in VCI

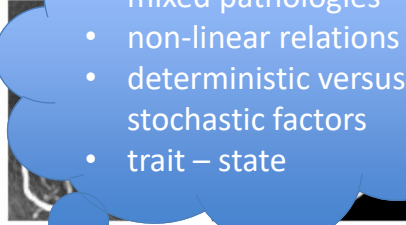
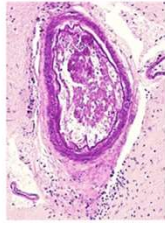


VCI – opportunities

risk factors



vascular disease processes



cognition



consider:

- mixed pathologies
- non-linear relations
- deterministic versus stochastic factors
- trait – state

novel markers of disease processes



- genetics
- circulating biomarkers



- imaging markers

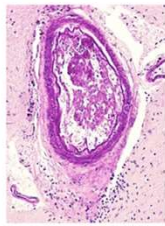


VCI – opportunities

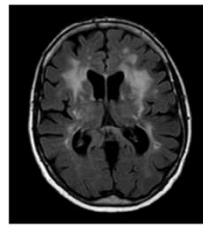
risk factors



vascular disease processes



tissue injury



cognition



novel markers of disease processes



- genetics
- circulating biomarkers



- imaging markers

novel markers of functional impact



- connectomics
- lesion pattern analyses



thank you !



Dutch
CardioVascular
Alliance

