The University of Pittsburgh Alzheimer Disease Research Center (ADRC) has been selected to participate in a landmark clinical trial to test a specific way to prevent the memory loss associated with Alzheimer’s disease (AD) in adults who may be at higher risk for developing the disease but who have no symptoms. The study seeks to enroll 1,000 healthy adults between the ages of 65 and 85 at trial sites across the United States, Canada, and Australia. The ADRC is actively seeking volunteers in this age range who have normal memory function.

The study will focus on reducing amyloid in the brain. Amyloid is a protein that is normally produced in the brain that can build up in older people, forming amyloid plaque deposits. Scientists believe that this buildup of deposits may play a key role in the eventual development of AD-related memory loss. The overall goal of the Anti-amyloid Treatment in Asymptomatic Alzheimer’s (or A4) study is to test whether decreasing amyloid with an investigational antibody treatment can help to slow the memory loss associated with amyloid buildup in some people.

An estimated 5.3 million Americans suffer from AD, and every 67 seconds, another person develops the illness. In Pennsylvania, 270,000 people are currently living with AD. Finding a cure is considered to be a pressing need by area aging experts as well as local AD patients and their families.

This series addresses the following questions:
1. What are clinical trials?
2. What are the benefits of volunteering for a clinical trial?
3. Why are placebos important in clinical trials?
4. What is informed consent?
5. What steps does a person go through to enroll in a clinical trial?
6. What happens during a clinical trial?
If you follow the news on Alzheimer’s disease research, you may have noticed that new findings on the relationship between nutrition and cognition seem to be reported every day. To help you keep pace with this rapidly expanding area of research, we recently added a new feature section to Pathways called Food for Thought. We are pleased to present the second publication of this new section.


**WHAT THEY DID:** The research team purchased fresh pomegranates, figs, and date palm fruits from farms in Oman, Jordan. They froze the fruit for five days, then ground it using a coffee grinder before sending it to the United States, where research collaborators prepared diets that could be given to research mice. The specialized diets contained 4 percent of a powder form of each type of fruit. Mice with a genetic form of Alzheimer’s disease (AD) and a control group of mice without AD were fed diets with 4 percent pomegranate, fig, or date and no dietary supplement for 15 months.

**WHAT THEY FOUND:** While each of the fruit supplements had at least some beneficial effect on brain chemistry, the mice that were fed the pomegranate-enriched diet displayed the strongest benefits, including lower levels of neuroinflammatory markers in both blood plasma and brain regions that are important for AD.

**WHY IT MIGHT WORK:** The fruits tested in this study are very high in antioxidants, which help the body to remove free radicals, providing protection against a wide array of age-related diseases.

**THE BOTTOM LINE:** Natural fruits, like pomegranates, show promise for protecting the brain against AD.

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**ADRC Turns 30 and Secures Federal Funding through 2020**

BY OSCAR LOPEZ, MD

We proudly announce that this year marks the 30th anniversary of the University of Pittsburgh Alzheimer Disease Research Center. Over the past three decades, the center has been continuously funded in five-year increments, with each five-year cycle requiring the submission of a grant application to the National Institute on Aging.

There are two key elements of the grant proposal: First, the grant should provide a summary of the impact that the center has had in the field of Alzheimer’s disease (AD) research and on its local and regional community. Second, the grant should outline a plan for making an even greater impact during the next five-year grant cycle. In terms of impact, over the years, our center has had the privilege of being trusted to evaluate thousands of individuals from the tristate area who are exhibiting what might represent signs of AD or a related disorder and supporting those individuals and their families over time as they begin treatments, enter clinical trials, or undergo further evaluation. The ADRC has been a test site for dozens of experimental medications, including most of the drugs that are today’s mainstays of treatment for AD. We are also home to world-renowned researchers like William Klunk, MD, PhD, and Chester Mathis, PhD, who developed Pittsburgh compound B, a revolutionary radiopharmaceutical, Pittsburgh compound B, or PiB for short, is used during positron-emission tomography (PET) scanning to detect changes in the brain associated with AD. Along with similar agents that have since been developed, PiB is increasingly used in clinical drug trials of anti-amyloid medications to monitor possible effects on brain amyloid.

While we are proud of these accomplishments and their impact on the field, we also are keenly aware of the need to do more and to push harder over the next five years. This push includes advancing the strongest possible scientific ideas and serving as a training site for young researchers in the field. Our goals are to better understand and treat and ultimately to prevent AD and related disorders. These goals are ambitious, but we are fortunate to have a dedicated group of research participants, an excellent staff of clinicians, and an ever-growing cadre of committed researchers who together will help us to ensure that the next five years are as successful as possible.

Information obtained from the Alzheimer’s Disease Education and Referral Center (ADER) fact sheet “Participating in Alzheimer’s Disease Clinical Trials and Studies,” and the ADER fact sheet “Participating in Alzheimer’s Research: For Yourself and Future Generations.”

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**A4 Seeks to Enroll 1,000 Healthy Adults, continued from page 1**

“...”

“...”

“...”

“...”

The A4 study is exploring whether we can treat Alzheimer’s disease the same way we now address high cholesterol and heart disease—halting the disease before it even starts,” says Reisa Sperling, MD, of Harvard University, principal investigator of the A4 study. “The A4 study offers new hope that we can give people a way to fight back and give them something they can actively do to protect their own memories. We hope to eventually spare other generations from ever facing this devastating disease.”

The A4 study is funded by the National Institute on Aging of the National Institutes of Health, Eli Lilly and Company, and several philanthropic organizations and is coordinated by the Alzheimer’s Disease Cooperative Study, located at the University of California, San Diego.

To volunteer for the A4 study or for more information, please visit a4study.org, contact Katy Zorich at 412-692-2730 or orchowskik3@upmc.edu, or contact MaryAnn Oakley at the ADRC at 412-692-2721 or oakleym@upmc.edu.
NEW ADRC STUDY ON SUBJECTIVE COGNITIVE DECLINE

“Why am I always losing my keys?”

“Did I forget again where I parked my car?”

“I’ve always had trouble with names. It’s getting even worse.”

The Alzheimer Disease Research Center (ADRC) is starting a new study in the 2015–20 funding cycle looking at subjective cognitive decline. This describes a state of cognition in people who are concerned about changes in their memory—changes they perceive in their day-to-day lives—but who perform normally on standardized memory testing and are otherwise healthy and functioning well. Because mild memory decline is part of the normal aging process over the life span, in some ways, subjective cognitive decline might describe almost everyone over age 40. However, the ADRC study is focusing on individuals who are concerned enough about their self-perceived memory changes that they have spoken to their doctor or have contacted a specialist (such as the ADRC Memory Clinic) for an evaluation. The study will involve brain imaging, computerized cognitive tasks, self-report questionnaires, and annual follow-up visits at the ADRC. The study will be led by Beth Snitz, PhD, an assistant professor of neurology at Pitt and ADRC neuropsychologist. Through this study, investigators hope to learn more about the differences between memory complaints that do not lead to future significant cognitive impairment and those that eventually do. Because memory complaints and concerns are so common in normal aging, this distinction is difficult for doctors to make right now. The hope is that if earlier risk factors for future memory decline can be better identified, earlier interventions can be more effective at prevention. These may include lifestyle modifications such as diet and exercise or new pharmacological treatments that we all hope will become available.

Announcing a New Partnership

The Alzheimer Disease Research Center (ADRC) proudly announces a new partnership with Francis Solano, MD, of CMU-UPMC. A practicing primary care physician, Dr. Solano also serves as vice president of the UPMC Physician Services Division and president of its Community Medicine Division. Dr. Solano has been providing primary care to Pittsburghers since 1984 and has repeatedly been recognized in Pittsburgh Magazine’s “Best Doctors” edition and in “Best Doctors in America.” By sharing information about the ADRC with patients in his practice, Dr. Solano is providing an important connection to people who may be wondering whether changes in their memory are merely “senior moments” or indications of something more serious. Please join us in thanking Dr. Solano for supporting research on Alzheimer’s disease and related disorders.

Outreach Happenings

MARITA GARRETT

Here at the Alzheimer Disease Research Center (ADRC), we are happy to have made it to summer after a bitterly cold winter. Even with the trying weather, our staff members were pleased to have been able to conduct outreach presentations at the Port Vue Apartments, Pennshaw Estates, Electric Avenue Apartments, and John Fraser Hall. For the eighth time, we participated in the annual Take a Health Professional to the People Day, presented by the University of Pittsburgh Center for Health Equity. We believe that it is vital to have a presence in the communities we serve and to continue spreading awareness about Alzheimer’s disease and the ADRC.

Our third annual Black History Month event, titled The Time Is Now: Addressing Mental Health in Our Community, was held on Thursday, February 26, 2015, at the Kingsley Association. For this event, we embarked on a new partnership with the Aging Institute of UPMC Senior Services and the University of Pittsburgh and continued our partnership with the Alzheimer’s Association Greater Pennsylvania Chapter. Gail Roddie-Hamlin, president and CEO of the chapter, provided opening remarks to kick off another wonderful installment of this annual event. Additional speakers were Jennifer Lingler, PhD, CRNP, of the ADRC; Suzanne Weesies, family services coordinator for the Alzheimer’s Association; Erica L. Upshaw-Ginver, counselor and owner of Vision Towards Peace LLC; and Vicki Helgeson, professor of psychology at Carnegie Mellon University. Helgeson’s presentation was pertinent, as Black adults are 20 percent more likely to report serious psychological distress than their counterparts.

The current cycle of A Series to Remember: Presentations with Experts on Brain Health, Memory, and Aging, part of our collaboration with Vantage, Inc., senior center, started on May 29, 2015. The speakers were Tiona Jones and Gianna Davis, of the Carnegie Mellon CHOICE Study, who presented “Diabetes and Mindful Eating.” The second lecture took place on June 26, 2015, with Kelly Covone-Henning of the Aging Institute discussing “Senior Resources in the Community.” All of the lectures are held at Vintage senior center.

Last, but not least, we hosted our spring session of the Walter Allen Memorial Seminar Series on June 4, 2015, at the Hill House Association’s Kaufmann Center. The featured speaker was Kirk Erickson, PhD, who spoke on the impact of fitness on the brain. Erickson spoke at a previous Series to Remember lecture and the response was so positive that he was invited to speak again. Needless to say, his presentation this time was another resounding success!

If you would like information about upcoming seminars and/or support groups, please contact Marita Garrett at 412-692-2722 or garrettmm@upmc.edu

alzheimer’s association

The Alzheimer’s Association 24-hour helpline provides reliable information and support to all who need it. Call the toll-free hotline anytime, day or night, at 1-800-272-3900.

Awards and Accolades

On April 10, 2015, the Alzheimer Outreach Center (AOC), part of the Alzheimer Disease Research Center, was honored with the Alpha Kappa Alpha Sorority, Inc., Health Promotion Award at its 84th Great Lakes Regional Conference, held at the David L. Lawrence Convention Center. The theme of the conference was Launching New Dimensions of Service: Honoring Community Commitment. The AOC was recognized for its outreach efforts in generating awareness and support for Alzheimer’s disease programming and research, especially in the African American community. Dr. Beth Snitz, associate director of outreach, was present to accept the award on the AOC’s behalf.

The AOC is grateful to be recognized by Alpha Kappa Alpha and will continue to make great strides in its outreach and efforts to find a cure.

KIRK ERICKSON, PhD

Congratulations to ADRC investigator Kirk Erickson, PhD, who received a 2015 University of Pittsburgh Chancellor’s Distinguished Research Award. Erickson, an associate professor in the University of Pittsburgh Department of Psychology, earned this recognition for his groundbreaking research on the role of physical activity in promoting late-life cognitive function.
In Memoriam

The University of Pittsburgh Alzheimer Disease Research Center thanks the following individuals and companies for their generous donations received between October 18, 2014, and May 6, 2015.

In Memory of Reverend
Dr. James E. Arnette
Warner and Louise Johnson

In Memory of Mary Barclay
Marcia Adamitz
Jeanne Clark
Harry and Arlene Crownover
Louis and Darlene Ligelli
Carol and John P. Marshall Jr.
Joseph and Ruth Ann Parkinson
Janet Vidina

In Memory of Mary Kay Brooks
Dale and Lynn Lazar

In Memory of Val Buttignol
Carol Jane Buttignol

In Memory of Therma Carnahan
David and Susan Benton

In Memory of James Christman
Kathleen Robinson
Sarah Robinson
and MaryJane Yankowski

In Memory of Violet Cole
Carl and Margaret Chiarenza

In Memory of Raymond W. Cromer
Sihol Builders Supply Co.
Richard and Sandra Teodori

In Memory of Lynn Fink
Connie Patrick
Laurel Sabol

In Memory of Sarah Jane Gleeson
Roberta M. Churilla

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Sandra Bennett
Leonard and Paula Finster

Robin and Sandra Miller
Scott Schneider and
Miriam Struck
Marcia Urie
The Woodfield ES PEP Team
Jamie Yeager

In Memory of Dean Hirsfield
Dale and Lynn Lazar

In Memory of Randall Scott Hufnagel
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Marsha Lauterbach VanKirk

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Dominick and Susan Comi
Ronald and Margaret Costa
Joanae Malencia

In Memory of Sylvia Michaels
Pamela Michaels

In Memory of Laura Mae Neppach
BEGA-US

In Memory of McKay Palmo
Charles and Connie Stewart

In Memory of James Fletcher
Jean Fletcher

In Memory of Margaret Porvaznik
Drew Porvaznik

In Memory of Patricia Schaefer
Richard and Aldona Barch
Patricia Bodjaiak
Francis Cappetta, DDS
Pamela Cherubin
Loern and Megan Driscoll
Steven and Janet Ottone
Thomas and Mary Pillon
Michael and Renay Schaefer

In Memory of Wayne Schuetz
Roberta M. Churilla
Katherine Schuetz

In Memory of Crawford “Bud” Scott Jr.
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Matt and Amy Baker
Christopher and Anne Griffin
Jack and Jean Kabazie
Polziieni Accounting and
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In Memory of Georgie Shames
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Gary and Margaret Fischer
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In Honor of Eleanor Loftus
Edward Loftus

In Honor of Lori McIntyre
Steve McIntyre

Research Donations
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James A. Christie
Robert Cook and Roberta Kostick
Stacey Cotton
Anna Marie Criss
Adam Deiter
Erika Douglass

In Honor of Adam deiter

continued on page 8
**Research Donations (cont.)**

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**Additional Research Donations**

- Eva Blum and Burt Tansky
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- The DeMoe Family Fund
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- James and Catherine Stallard
- Thompson Public School #61
- The Pittsburgh Foundation
- Nancy T. and William S. Conover II Fund
- Mr. and Mrs. Wesley W. Posvar Jr. for FTD Research
- Chet Thaker and Julie Ann Dobson
- The Tippins Foundation
- Betty Lou Yount Trust

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**In Memoriam, continued from page 7**

Thank you!

Your contributions are greatly appreciated and help to support research and education in the area of Alzheimer’s disease. You can remember or honor a loved one by using the envelope enclosed in this newsletter to send in your donation.

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**Stay up to date! Visit Our Web Site**

For up-to-date information about the Alzheimer Disease Research Center, the Brain Donation Program, clinical trials, and community presentations, please visit www.adrc.pitt.edu.

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**Additional Information: Two Types of AD**

**Younger-Onset Alzheimer’s Disease**

Alzheimer’s disease (AD) is considered to be younger-onset Alzheimer’s if it affects a person under age 65. Younger-onset Alzheimer’s also can be referred to as early onset Alzheimer’s. Up to 5 percent of the more than 5 million Americans with Alzheimer’s have younger-onset Alzheimer’s.

The majority of people with younger-onset Alzheimer’s have sporadic AD, which is the most common form of Alzheimer’s and is not attributed to genetics. Doctors do not understand why most cases of younger-onset Alzheimer’s appear at such a young age.

Because health care providers generally don’t look for AD in younger people, getting an accurate diagnosis of early onset Alzheimer’s can be a long and frustrating process. Symptoms may be incorrectly attributed to stress, menopause, or depression. This can lead to a misdiagnosis (sometimes multiple times) and incorrect treatment.

**A Rare Form of Alzheimer’s Disease: Familial Alzheimer’s Disease**

In a few hundred families worldwide, scientists have pinpointed several rare genes that directly cause Alzheimer’s. People who inherit these rare genes tend to develop symptoms in their 30s, 40s, and 50s. When AD is caused by these genes, called deterministic genes, it is called familial AD, and many family members in multiple generations can be affected.

Although the genes that cause familial Alzheimer’s are rare, their discovery has provided important clues that aid in our understanding of Alzheimer’s. All of these genes affect the processing or production of beta-amyloid, the protein fragment that is the main component of plaques in the brain. Beta-amyloid is a prime suspect in the decline and death of brain cells. Several drugs now in development target beta-amyloid as a potential strategy to stop AD or significantly slow its progression.

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**Families Making a Difference and How YOU Can Join Them**

Glenna Sue Baker, a retired pharmacist and University of Pittsburgh graduate, was diagnosed with Alzheimer’s disease in 2006 at the age of 60. In 2010, she enrolled in a research study at the University of Pittsburgh Alzheimer Disease Research Center (ADRC).

After Baker’s diagnosis, her son, Jason Baker; his wife, Leslie; and Glenna’s daughter, Katie Baker Haynes (a graduate of the University of Pittsburgh College of Business Administration), began looking for a way to make a difference. They started by participating in the Walk to End Alzheimer’s at the National Mall in Washington, D.C. The goal of the walk is to raise awareness and funds for Alzheimer’s care, support, and research. Deciding they wanted to do more, they quickly shifted to holding their own fundraising effort in their backyard, with proceeds directly benefiting the ADRC. The event, now held every Labor Day weekend, when the whole Baker family is in town, Live bands such as Government Cheese and Legends; food donated by local businesses such as Grove City County Market, Pizza Joe’s, and Lettieri’s Fine Dining; and raffles on items also donated by local businesses such as D.A.M. Good Wings, Ben Bissett Chevrolet, and local artisans all help to make the event a success. The fundraiser started out the first year with attendees making a $5 donation and has grown to more than 200 attendees a year, with increasing donations. The Bakers have a tremendous amount of support from family, friends, and residents as well as additional support from the generous local business community in the Mercer, Pa., area where they live. “We may have to start looking for other venues because it is getting so big,” said Jason Baker.

Jason and his family have raised more than $15,000 in support of research at the ADRC. Jason mentioned that a former classmate and friend’s father recently passed away from the disease. “Alzheimer’s disease touches a lot of lives,” he said. “We want to find a way to help cure it or slow it down.”

The family plans to hold the seventh annual event on Saturday, September 5, 2015. If you would like to learn more about the event, please e-mail memoryfinderspa@gmail.com.

If you are interested in learning about ways that you can help to support the Alzheimer Disease Research Center, please contact James Olsen at 412-647-7781 or Olsen@pmhsf.org.
Volunteers Needed for Research Studies

Get involved! We are in constant need of participants for several research studies and invite anyone with interest to call the ADRC at 412-692-2721 or e-mail oakleym@upmc.edu.

**STARBEAM Study**

**DESCRIPTION**
The primary objective of this study is to establish the efficacy of an investigational medication (Lu AE56054) as an adjunctive therapy to donepezil for symptomatic treatment of participants with mild to moderate Alzheimer’s disease (AD).

**STUDY LENGTH**
Seven months

**STUDY REQUIREMENTS**
- 50 years of age or older with mild to moderate AD
- Not currently taking memantine
- A study partner who will accompany you to all study visits

**CONTACT**
Lori Macedo at 412-692-2705 or macedona&upmc.edu or MaryAnn Oakley at 412-692-2721 or oakleym@upmc.edu

**Noble Study**

**DESCRIPTION**
This is a clinical study to evaluate an investigational drug used to treat participants with mild to moderate Alzheimer’s disease (AD). The investigational drug may work by protecting brain cells, which may result in improved memory.

**STUDY LENGTH**
14 months

**STUDY REQUIREMENTS**
- 55–85 years of age
- A diagnosis of mild Alzheimer’s disease
- A study partner who will accompany you to all study visits

**CONTACT**
Thomas Baumgartner at 412-692-2716 or baumg@upmc_ed or MaryAnn Oakley at 412-692-2721 or oakleym@upmc.edu

**AMBAR Study**

**DESCRIPTION**
The primary objective of this study is to determine whether short-term followed by long-term low-volume plasma exchange (a process of blood filtering) is able to modify Alzheimer’s disease patients’ cognitive, functional, and behavioral symptoms.

**STUDY LENGTH**
14 months (six weekly plasmapheresis sessions followed by 12 monthly plasmapheresis sessions)

**STUDY REQUIREMENTS**
- 55–85 years of age
- A diagnosis of mild Alzheimer’s disease
- A study partner who will accompany you to all study visits

**CONTACT**
Donna Simpson at 412-692-2717 or simpsondm@upmc.edu or MaryAnn Oakley at 412-692-2721 or oakleym@upmc.edu

**A4 Study**

**DESCRIPTION**
The Anti-amyloid Treatment in Asymptomatic Alzheimer’s (or A4) study is among a new generation of clinical trials being developed to test therapies that might prevent, or at least delay, the onset of AD in cognitively normal people who may be at risk, as evidenced by a PET scan.

**STUDY LENGTH**
Three years

**STUDY REQUIREMENTS**
- 65–85 years of age
- Normal thinking and memory abilities
- A study partner who has contact with you at least once a week and who can answer questions about you (contact may be in person or by phone)
- Willingness and ability to receive intravenous infusions of the investigational treatment (solanezumab) or a placebo every four weeks for three years

**CONTACT**
Katy Zorich at 412-692-2730 or orchowskik@upmc.edu or MaryAnn Oakley at 412-692-2721 or oakleym@upmc.edu

**IDEA Study**

**DESCRIPTION**
IDEA is a research study that looks at ways to minimize problems with everyday tasks.

**STUDY LENGTH**
One year

**STUDY REQUIREMENTS**
- Age 60 or older
- A diagnosis of mild cognitive impairment
- Willingness to engage in study activities at home

**CONTACT**
MaryAnn Oakley at 412-692-2721 or oakleym@upmc.edu

**Connect Study**

**DESCRIPTION**
This study will test whether an oral experimental drug, AZD0530 (saracatinib), will slow the progression of mild-stage Alzheimer’s disease (AD).

**STUDY LENGTH**
One year

**STUDY REQUIREMENTS**
- 55–85 years of age
- A diagnosis of mild AD
- A study partner who will accompany the participant to most clinic visits

**CONTACT**
MaryAnn Oakley at 412-692-2721 or oakleym@upmc.edu

**IDEA Study**

**DESCRIPTION**
IDEA is a research study that looks at ways to minimize problems with everyday tasks.

**STUDY LENGTH**
One year

**STUDY REQUIREMENTS**
- Age 60 or older
- A diagnosis of mild cognitive impairment
- Willingness to engage in study activities at home

**CONTACT**
MaryAnn Oakley at 412-692-2721 or oakleym@upmc.edu
Ask the Medical Professional

BY ROBERT SWEET, MD, AND DONNA SIMPSON, CRNP, MPH

Q: Are there any medications that someone with Alzheimer’s disease should be cautious about taking?

A: A person diagnosed with Alzheimer’s disease (AD) may be particularly sensitive to becoming more confused when given certain medications. Such sensitivity also may cause worsening memory problems, disrupted sleep, agitation, and even hallucinations. Medications that block a brain chemical called acetylcholine as their main effect or as a side effect can cause these difficulties. Other medications can cause excess sedation or affect balance, increasing the risk of falls. Examples of both types of medications to avoid are shown in the table below.

<table>
<thead>
<tr>
<th>Medications That Can Increase Confusion</th>
<th>Medications That Can Increase Risk of Falls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benadryl/diphenhydramine (included in many over-the-counter allergy medications and Tylenol® PM)</td>
<td>Benzodiazepines (tranquilizers): Valium/diazepam, Ativan/lorazepam, Xanax/alprazolam, and others</td>
</tr>
<tr>
<td>Certain antidepressant medications: Elavil/amitriptyline, Tofranil/imipramine, Pamelor/nortriptyline, Sinequan/doxepin</td>
<td>Sleeping pills: Ambien/zolpidem, Lunesta®/eszopiclone, Sonata/zaleplon, Halcion/triazolam, Restoril/temazepam, and others</td>
</tr>
<tr>
<td>Muscle relaxants: Flexeril/cyclobenzaprine, Robaxin/methocarbamol, and others</td>
<td>Sedatives: Phenobarbital</td>
</tr>
<tr>
<td>Certain antipsychotic medications: Thorazine/chlorpromazine, Mellaril/thioridazine, Serentil/mesoridazine, and others</td>
<td></td>
</tr>
</tbody>
</table>

Many other medications also can increase confusion or the risk of falls. If one of these problems occurs after starting any medication, it should be brought to the attention of your physician. It also is important to discuss with your physician the pros and cons of any medications and whether there may be safer alternatives for individuals with Alzheimer’s disease before making a decision about starting a new medication.