

**OBJECTIVE**

We evaluated CSF biomarkers involved in inflammatory and neurodegenerative processes (beta-amyloid and tau proteins) in a population of narcoleptic drug-naïve patients ranging from early to late phases of the disease in order to determine whether the expression of these biomarkers changes in narcolepsy over time.

**METHODS**

We analyzed a population of narcoleptic drug-naïve patients compared to a sample of healthy controls. Patients and controls underwent lumbar puncture for CSF beta-amyloid<sub>42</sub> (Aβ<sub>42</sub>), total tau (t-tau) and phosphorylated-tau (p-tau) levels assessment. Moreover, based on the estimated median disease duration of the whole group, narcoleptic patients were divided in two subgroups: patients with a short disease duration (SdN, <5 years) and patients with a long disease duration (LdN, >5 years).

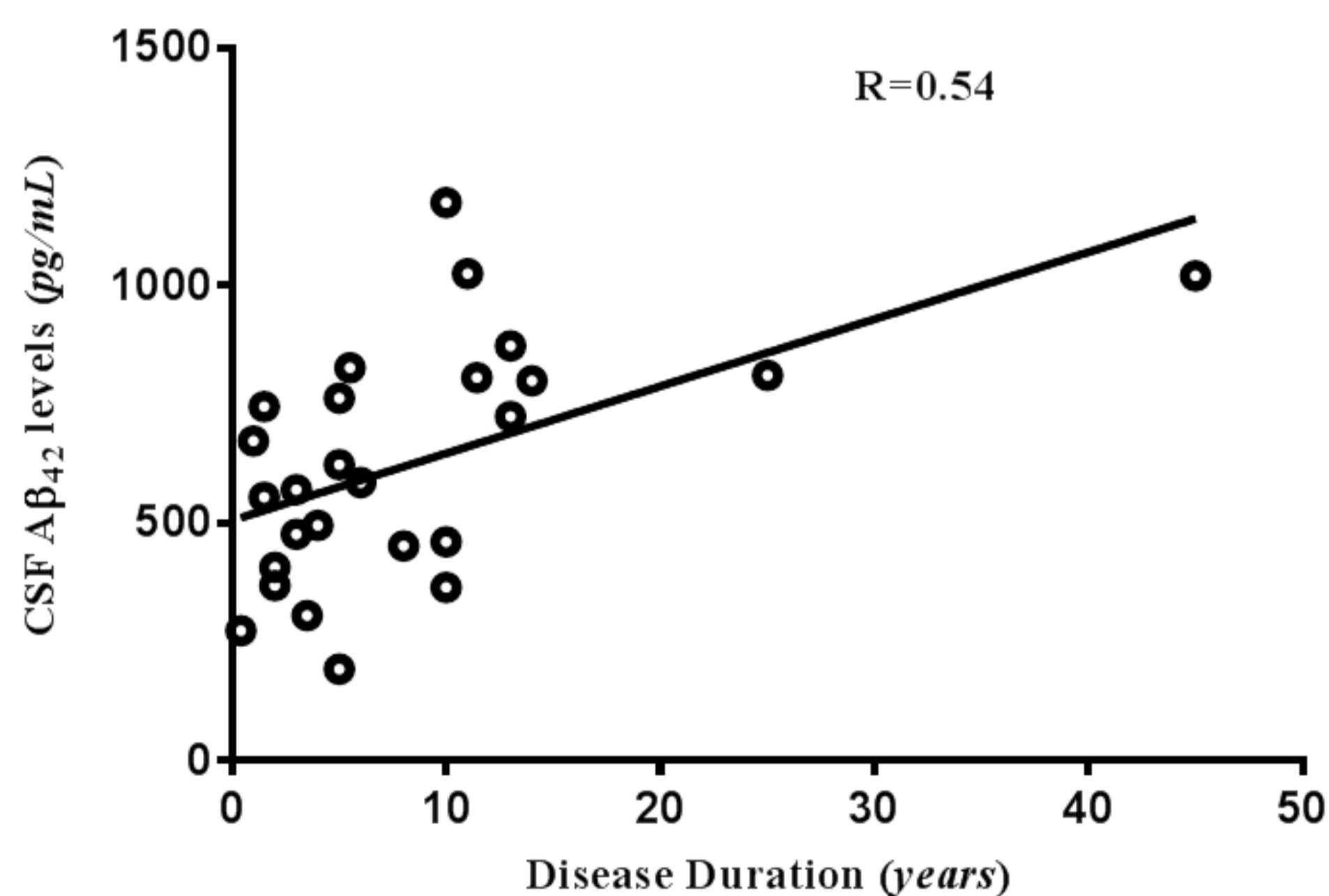
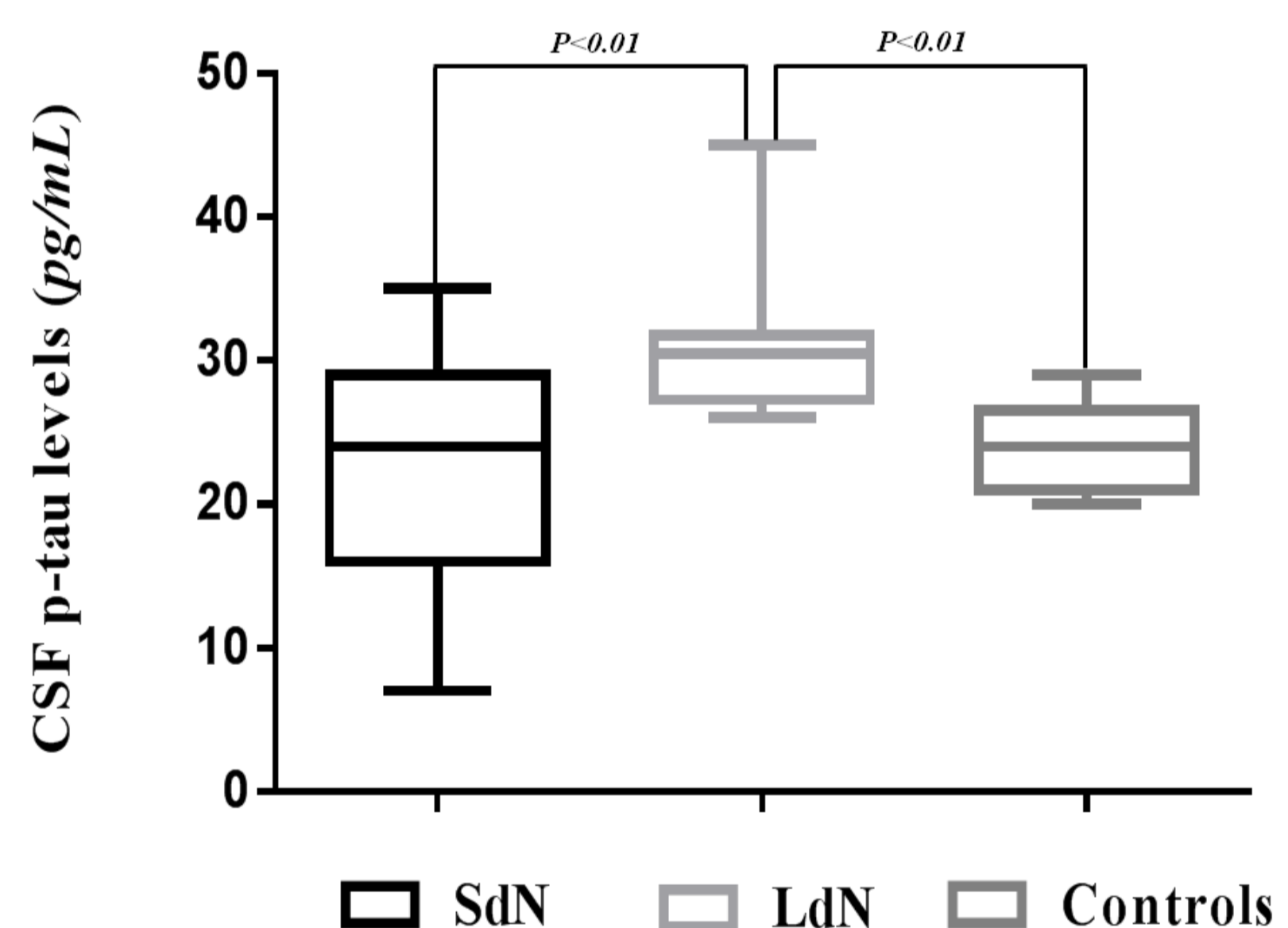
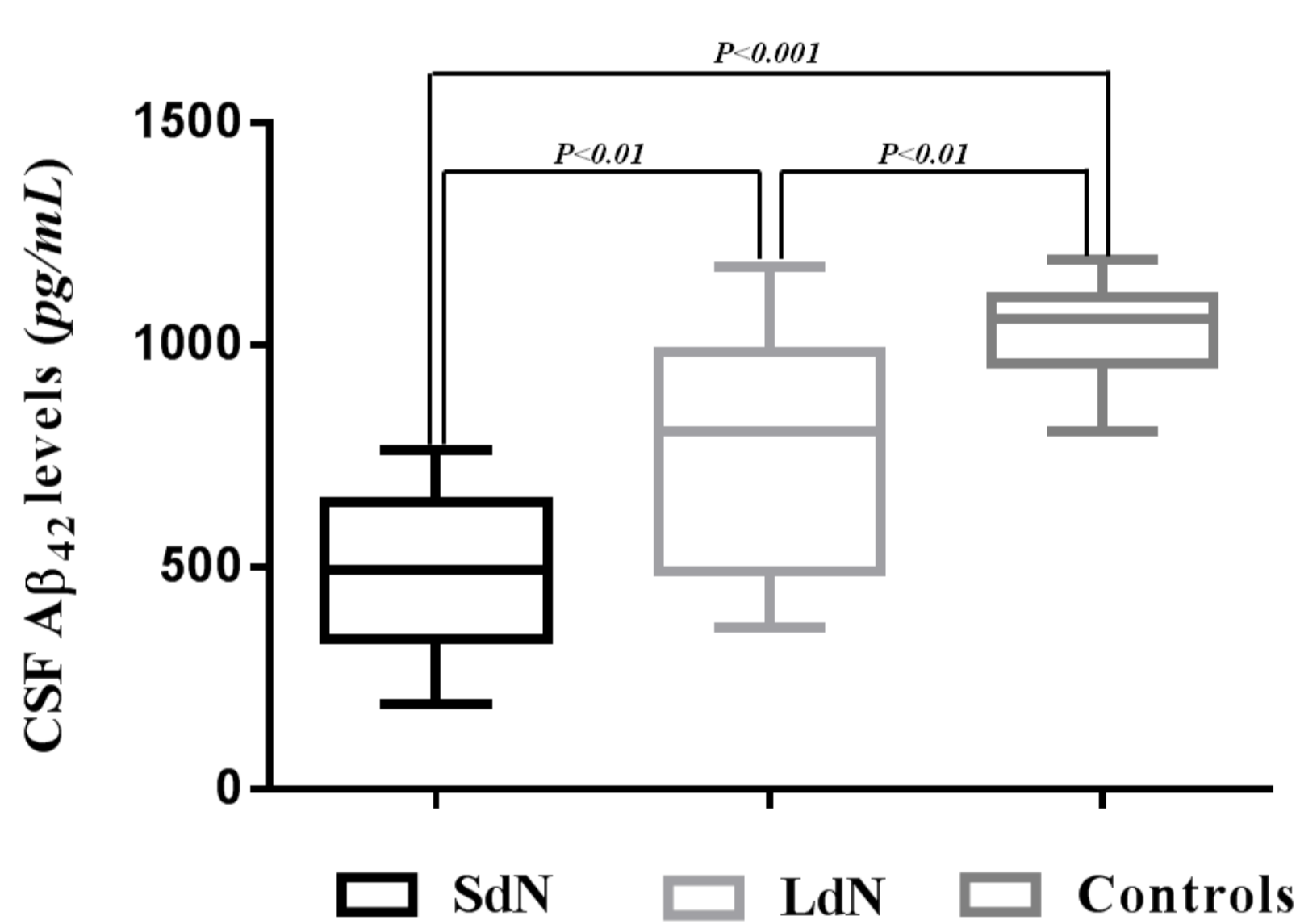
**RESULTS**

We found significant lower CSF Aβ<sub>42</sub> levels in the whole narcolepsy group with respect to controls. Taking into account the patients subgroups, we documented reduced CSF Aβ<sub>42</sub> levels in SdN compared to both LdN and controls. Even LdN patients showed lower CSF Aβ<sub>42</sub> levels with respect to controls. Moreover, we documented higher CSF p-tau levels in LdN patients compared to both SdN and controls. Finally, a significant positive correlation between CSF Aβ<sub>42</sub> levels and disease duration was evident.

Demographic Data	Narcoleptic patients (n = 26) (mean value ± SD)	Controls (n = 17) (mean value ± SD)	P value
Age	33.72 ± 11.58	33.29 ± 8.39	NS
Sex	14M 12F	10M 7F	NS
Disease Duration (years)	8.29 ± 9.46	NA	NA
Cataplexy (%positive)	46%	NA	NA
Sleep Paralysis (%positive)	77%	NA	NA
Hypnagogic Hallucinations (%positive)	69%	NA	NA
MSLT Data			
	Narcoleptic patients (n = 26)	Controls (n = 17)	P value
Sleep Latency	3.99 ± 1.81	NA	NA
SOREMp	3.58 ± 1.06	NA	NA
CSF Data			
	Narcoleptic patients (n = 26) (mean value ± SD)	Controls (n = 17) (mean value ± SD)	P value
Orexin A	79.12 ± 36.73	186.42 ± 22.29	<0.001
T-Tau	172.2 ± 69.68	212.41 ± 62.08	NS
P-Tau	28.52 ± 11.28	23.88 ± 2.95	NS
Aβ <sub>42</sub>	623.24 ± 252.63	1039 ± 105.05	<0.001

Demographic Data	SdN (n = 13) (mean value ± SD)	LdN (n = 13) (mean value ± SD)	P value
Age	29.15 ± 10.24	38.67 ± 11.28	NS
Sex	8M 5F	6M 7F	NS
Disease Duration (years)	2.84 ± 1.58	14.21 ± 10.92	<0.001
Cataplexy (%positive)	53%	38%	NS
Sleep Paralysis (%positive)	84%	69%	NS
Hypnagogic Hallucinations (%positive)	77%	61%	NS
MSLT Data			
	SdN (n = 13)	LdN (n = 13)	P value
Sleep Latency	3.93 ± 1.85	4.06 ± 1.84	NS
SOREMp	3.77 ± 1.01	3.38 ± 1.12	NS
CSF Data			
	SdN (n = 13) (mean value ± SD)	LdN (n = 13) (mean value ± SD)	P value
Orexin A	64.69 ± 36.88	92.19 ± 33.84	NS
T-Tau	168.84 ± 76.03	175.83 ± 65.28	NS
P-Tau	22.69 ± 8.58	30.67 ± 5.09	<0.01
Aβ <sub>42</sub>	496.54 ± 180.91	760.5 ± 253.02	<0.001

Demographic Data	N1 (n = 12) (mean value ± SD)	N2 (n = 14) (mean value ± SD)	P value
Age	27.45 ± 9.47	38.64 ± 10.93	NS
Sex	7M 5F	7M 7F	NS
Disease Duration (years)	4.63 ± 4.37	11.18 ± 11.41	<0.001
Disease Duration (years)	8.29 ± 9.46	NA	NA
Cataplexy (%positive)	100%	0%	<0.0001
Sleep Paralysis (%positive)	92%	64%	NS
Hypnagogic Hallucinations (%positive)	75%	64%	NS
MSLT Data			
	N1 (n = 12) (mean value ± SD)	N2 (n = 14) (mean value ± SD)	P value
Sleep Latency	3.91 ± 1.89	4.06 ± 1.82	NS
SOREMp	3.75 ± 1.05	3.43 ± 1.09	NS
CSF Data			
	N1 (n = 12) (mean value ± SD)	N2 (n = 14) (mean value ± SD)	P value
Orexin A	45.53 ± 13.11	105.53 ± 25.56	<0.001
T-Tau	177 ± 58.79	168.43 ± 79.19	NS
P-Tau	25.64 ± 7.66	30.78 ± 13.31	NS
Aβ <sub>42</sub>	574.82 ± 195.06	661.28 ± 291.57	NS



**CONCLUSIONS**

We hypothesize that beta-amyloid metabolism and cascade may be impaired in narcolepsy not only at the onset, but also along with the disease course, although they show a compensatory profile over time. Concurrently, also CSF biomarkers of neuron morphology and structure impairment (p-tau) appear to be altered in narcolepsy patients featured by a long disease duration. However, the mechanism underlying beta-amyloid and tau metabolisms impairment during narcolepsy remains still unclear and deserves to be better elucidated.