Higher t-tau/Aβ-42 ratio in AD subjects relates to more severe cognitive and neuropsychiatric symptoms.

E Scaricamazza¹, C Liguori², G Spalletta³, M Orfei³, S Gaudenzi³, GM Sancesario³, G Sancesario¹

¹Neurological Institute - Tor Vergata University of Rome, ²Neurophysiopathology Institute Tor Vergata University of Rome, ³Neuroscience Institute - I.R.C.C.S. Santa Lucia Foundation of Rome

Introduction

The cerebrospinal fluid (CSF) biomarkers total-tau (T-tau), hyper-phosforylated tau (P-tau) and the 42-amino-acid isoform of amyloid β (A β -42) reflect the core pathological features of Alzheimer's disease (AD): neuronal loss, intracellular neurofibrillary tangles and extracellular senile plaques [1].

The present study aims to evaluate whether changes in CSF AD biomarkers relate to different neuropsychological and neuro-behavioral patterns in an AD population.

Subjects

We enrolled **26 AD subjects**, 16 women and 10 men, with mean age of 69 years (ds 5.21) and mini mental state examination (MMSE) score of 23.70 (ds = 3.70).

All patients underwent a **lumbar puncture** with CSF analysis for AD biomarkers: $A\beta$ -42 (392.4 pg/mL, ds = 96.9 pg/mL), T-tau (748.4 pg/mL, ds = 582.0 pg/mL), P-tau (101.8 pg/mL, ds = 78.9 pg/mL). Since all AD patients showed the typical CSF AD profile characterized by lower CSF $A\beta$ -42 and higher CSF t-tau and p-tau levels, we specifically considered **T-tau/A\beta-42 ratio**, which reflects a higher extent of neuro-axonal degeneration and plaque pathology.

Therefore, T-tau/ $A\beta$ -42 ratio was correlated to an extensive **neuropsychological battery** and a neuro-behavioral assessment by means of the **neuropsychiatric inventory (NPI)** [2].

Results

The statistical analysis showed a significant correlation between T-tau/A β -42 ratio and lower global cognitive performances (MMSE: p < 0.05, r = -0.37)[Fig. 1], worse performances in tasks exploring episodic memory (Free Recall at the Rey Auditory Verbal Learning Test - RAVLT: p < 0.05, r = -0.38; Free recall at the Rey-Osterrieth complex figure test - ROCF: p < 0.05, r = -0.46) [Fig. 2, 3], semantic memory (Categorical Verbal Fluency: p < 0.05, r = -0.42), and executive functioning (Total errors at the Wisconsin Card Sorting Test: p = 0.05, r = -0.42).

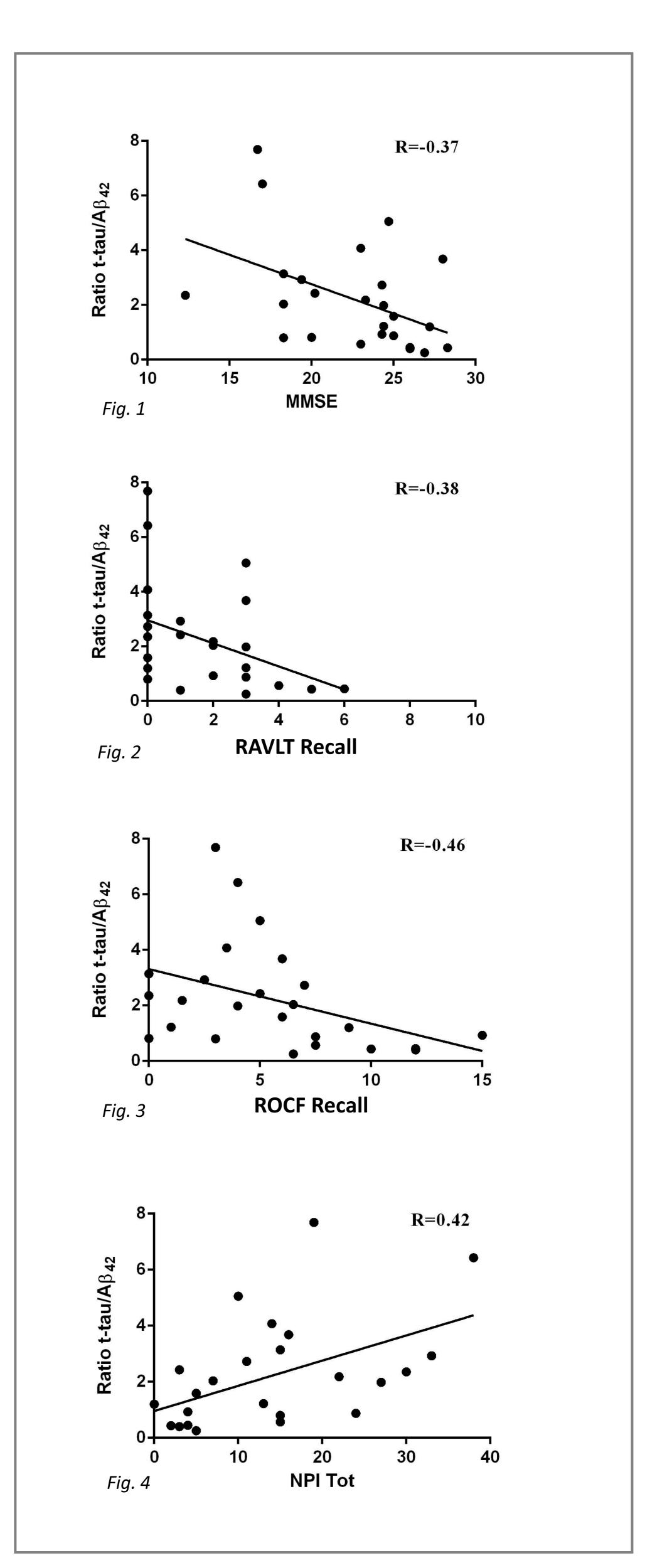
We also found that T-tau/A β -42 ratio relates to a higher total NPI score (p<0.05, r=0.42)[Fig. 4].

Conclusions

A higher T-tau/A β -42 ratio, expression a more severe tau and β -amyloid neurodegeneration, relates to poorer cognitive performances in AD patients.

In particular, this ratio specifically correlated with lower scores in **memory and executive tasks** and more severe **behavioral disturbances**.

These results suggest that in AD patients a more extensive neurodegeneration is related to cognitive and behavioral disturbances, which could reflect the dysregulation of temporal and frontal lobes function.



Bibliography

[1] Rosén C, Hansson O, Blennow K et al. Fluid biomarkers in Alzheimer's disease - current concepts. Mol Neurodegener. 2013 Jun 21;8:20. doi: 10.1186/1750-1326-8-20.

[2] Cummings JL. The Neuropsychiatric Inventory: assessing psychopathology in dementia patients. Neurology. 1997 May; 48 (5 Suppl 6):S10-6.



