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[Overview presentation]

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## Increasing plasma Abeta42/40 accuracy by combining p-tau181 levels that are measured by fully automated immunoassay platform

<ul> <li>Masahiro Miura<sup>1</sup>, Shigeki Iwanaga<sup>2</sup>, Toshiyuki Sato<sup>1</sup>, Atsushi Iwata<sup>3</sup></li> <li><sup>1</sup>Central Research Laboratories, Sysmex Corporation, Kobe, Japan,</li> <li><sup>2</sup>Technology Strategy, Sysmex Corporation, Kobe, Japan,</li> <li><sup>3</sup>Department of Neurology, Tokyo Metropolitan Geriatric Hospital and Institute of gerontology, Tokyo, Japan</li> <li>Overview</li> <li>Objectives</li> <li>Confirming amyloid pathology in the brain is necessary for determining the eligibility for Alzheimer's disease treatment with disease-modifying therapeutics. Blood-based biomarkers have attracted attention for invasiveness and accessibility, including the plasma β-amyloid1-40, 1-42 ratio (Aβ42/40) and phosphorylated tau (p-tau). We have previously shown that plasma Aβ42/40 measured by an Automated Immunoassay System HISCLTM-5000 / HISCL-800 can predict amyloid pathology with high accuracy. In this study, clinical performance was evaluated in combination with prototype p-tau181 assay to investigate the additional potential of blood biomarkers in predicting amyloid pathology.</li> <li>Methods</li> <li>Plasma Aβ42/40 and p-tau181 were measured in 25 samples collected at Tokyo Metropolitan Geriatric Hospital and Institute of gerontology to assess their ability to predict amyloid pathology. Amyloid pathology in the brain was determined by amyloid PET scans as assessed by visual read method. The distribution of each biomarker level in the PET-positive and PET-negative groups was compared by</li> </ul>		
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	Results
	The samples were classified into 8 amyloid PET positive and 17 negative groups.
	Both A $\beta$ 42/40 and p-tau181 showed significant differences between two groups
	(p<0.005, p<0.05, respectively). Furthermore, ROC analysis showed that the
	area under the curve (AUC) value was increased when combining p-tau181 with
	Aβ42/40 (AUC: 0.890) compared to Aβ42/40 alone (AUC: 0.857).
	Conclusion
	Our study has demonstrated that the plasma p-tau181 assay increased the
	predictive accuracy of plasma A $\beta$ 42/40 for amyloid PET status. In the future, we
	would increase the number of clinical samples to confirm the reliability of this
	specific combination. Through the expanding of our research, our goal is to
	contribute to the advancement of AD diagnosis using blood-based biomarkers.
Session	POSTER: THEME B (P0824 / #2855)