## Differences between symptomatic and disease-modifying treatments in AD



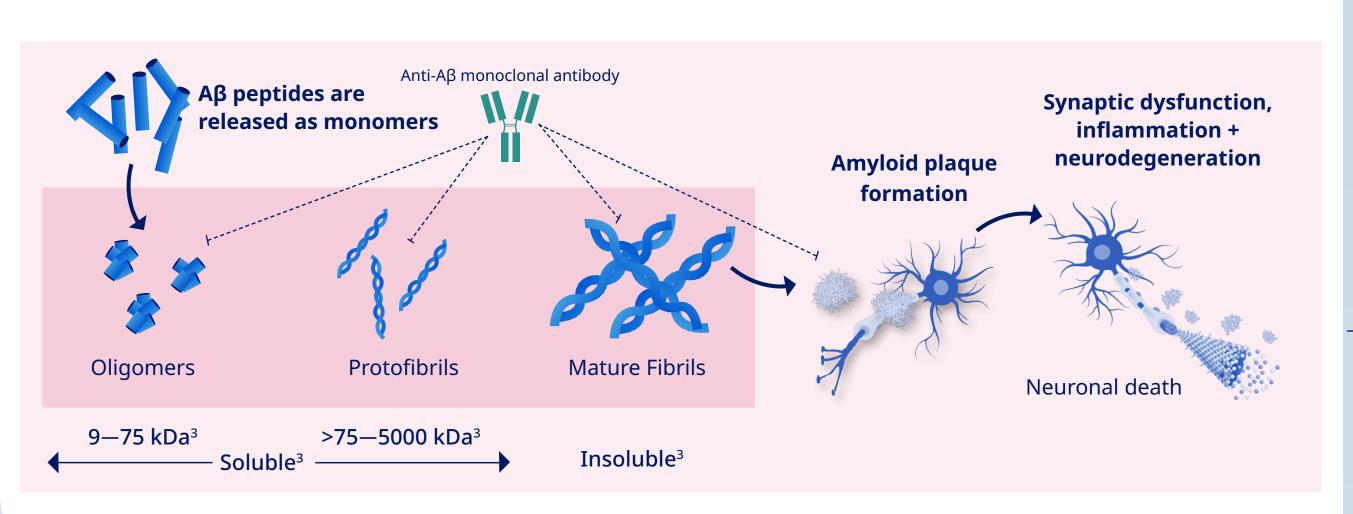
## Symptomatic treatments

- Improve cognitive and behavioral symptoms without altering the underlying disease<sup>1</sup>
- Examples of cognitive-enhancing agents:
  - AChE inhibitors and NMDA receptor antagonist<sup>1</sup>



## Disease-modifying treatments (DMTs)

- Do not treat symptoms, but target the underlying cause of disease to slow cognitive decline<sup>1,2</sup>
- Examples of DMTs:
  - Anti-A $\beta$  mAbs target several different forms of A $\beta$ —either soluble oligomers and protofibrils, or insoluble fibrils and plaques—and stimulate its immune clearance<sup>2</sup>



## Symptomatic treatments can improve quality of life in people with AD1

Symptomatic treatment for management of cognitive and behavioral symptoms of AD can:

Recent advances in symptomatic treatments aim to address major mental disorders and neuropsychiatric symptoms in AD<sup>1,4</sup>:













In 2023, the 1st FDA-approved drug to treat any neuropsychiatric symptom in AD was approved<sup>5,6</sup>

While symptomatic treatments help manage cognition and behaviour,<sup>1</sup> emerging DMTs are key to slowing AD progression.<sup>2</sup> However, new treatments are needed to address residual symptoms and other elements of AD pathology.<sup>1</sup>