

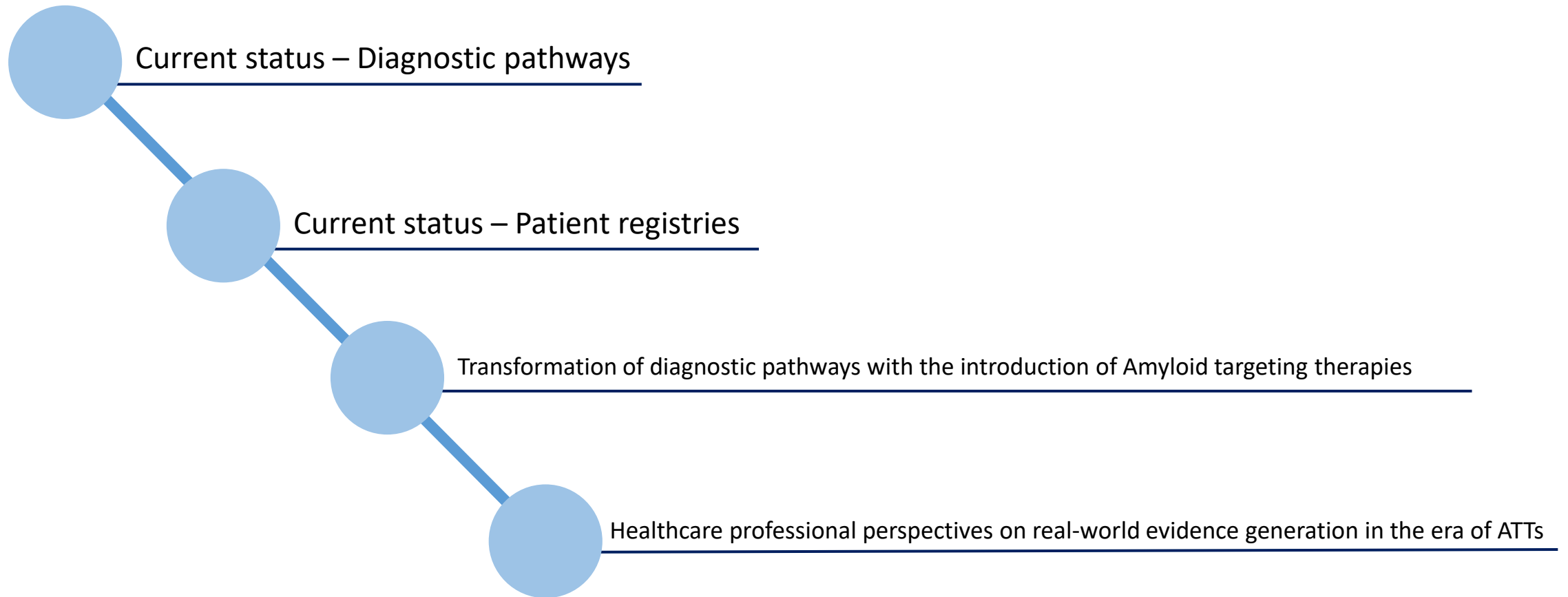
Stakeholders' perspectives on real-world evidence generation

Healthcare professional

Joint HMA/EMA multi-stakeholder workshop on Patient Registries for Alzheimer's disease
15th of December 2025

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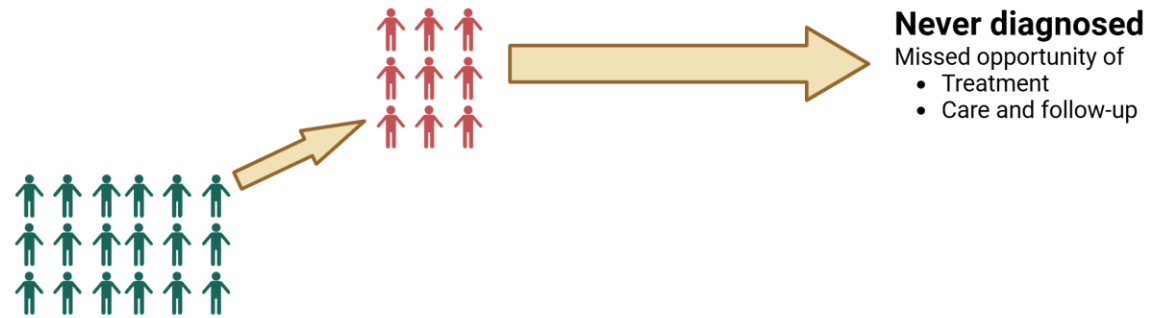
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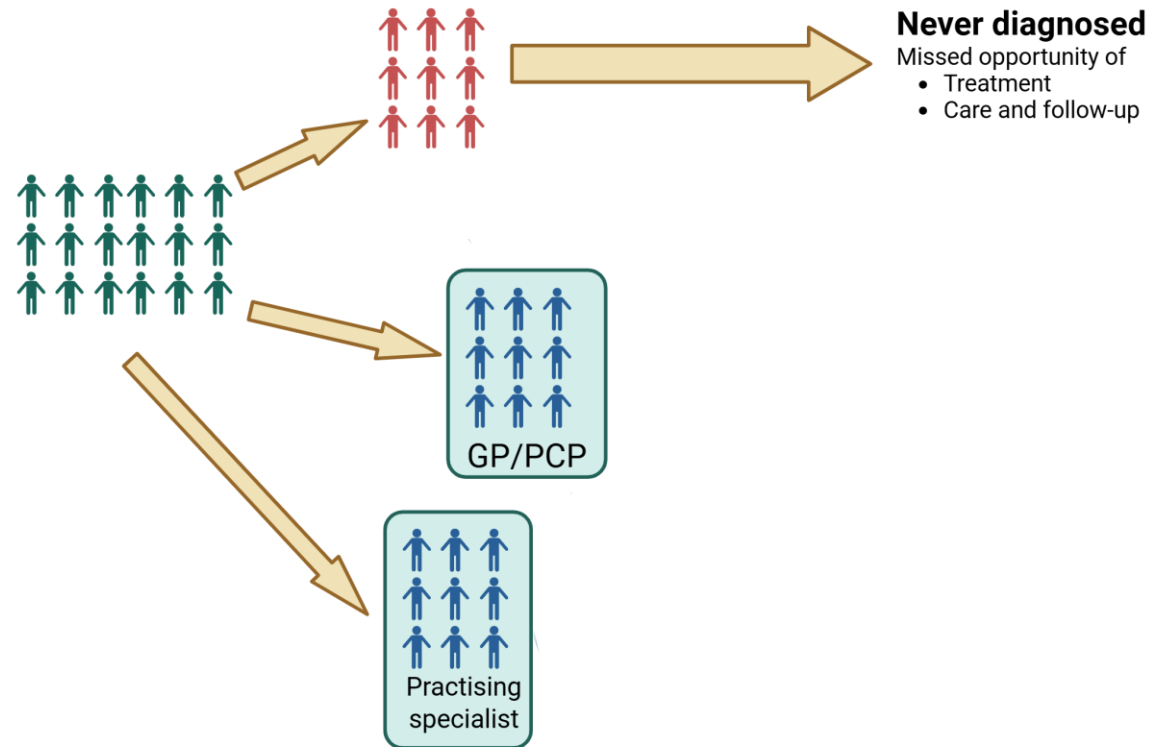
Patients with undiagnosed
Alzheimer`s disease



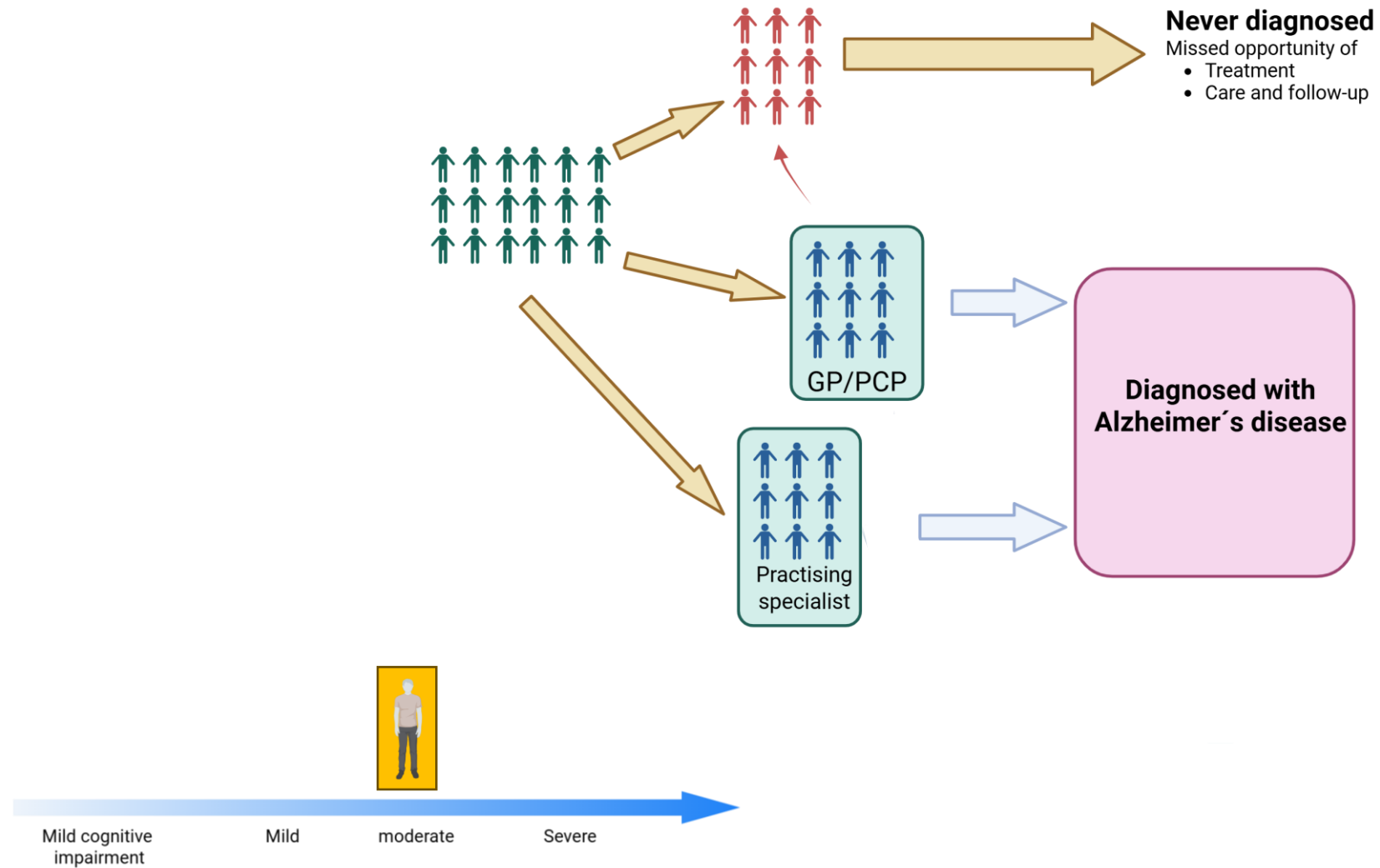
Current status – Diagnostic pathways



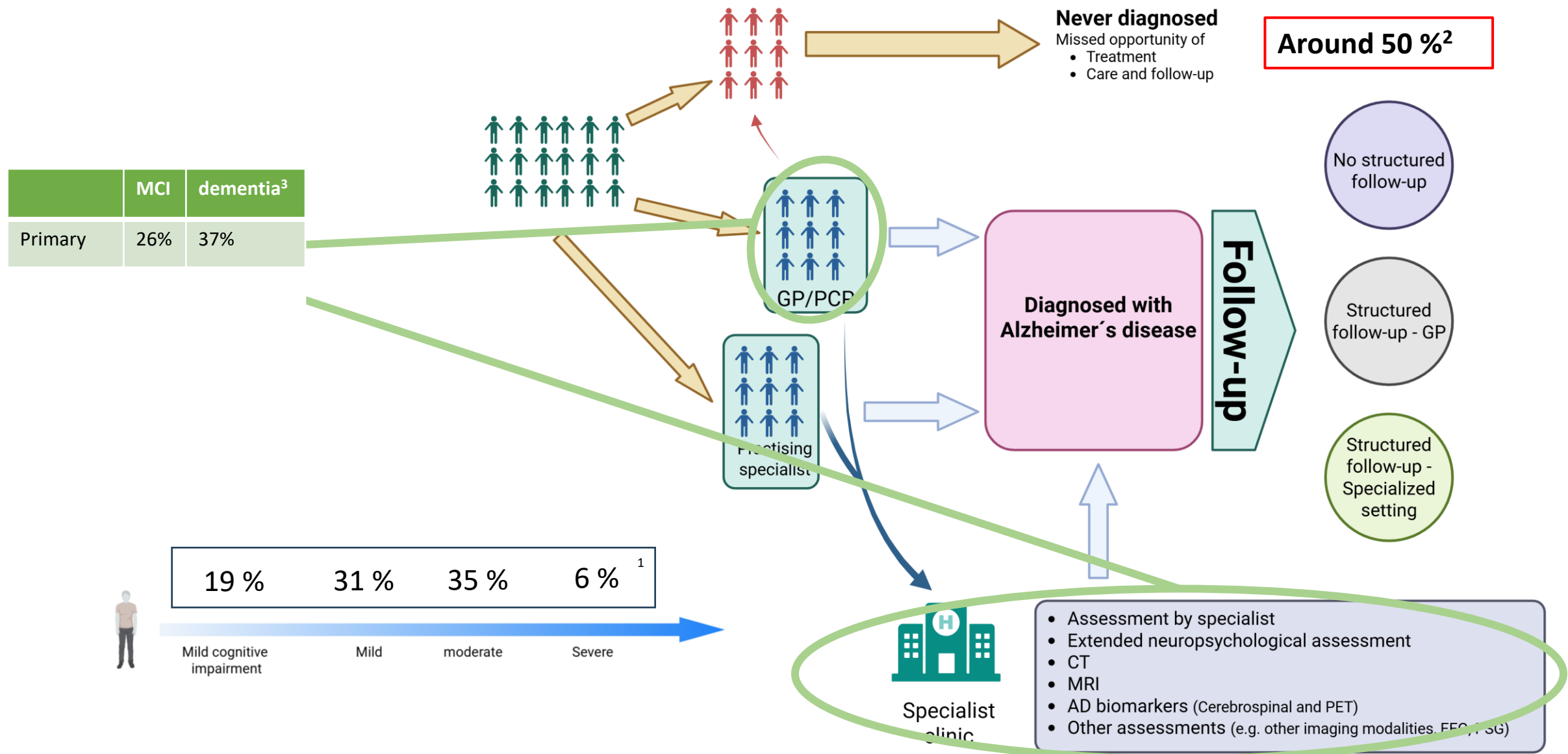
Current status – Diagnostic pathways



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¹https://www.sundk.dk/media/ibhhipdq/dandem_aarsrapport-2024_offentliggjort_version.pdf

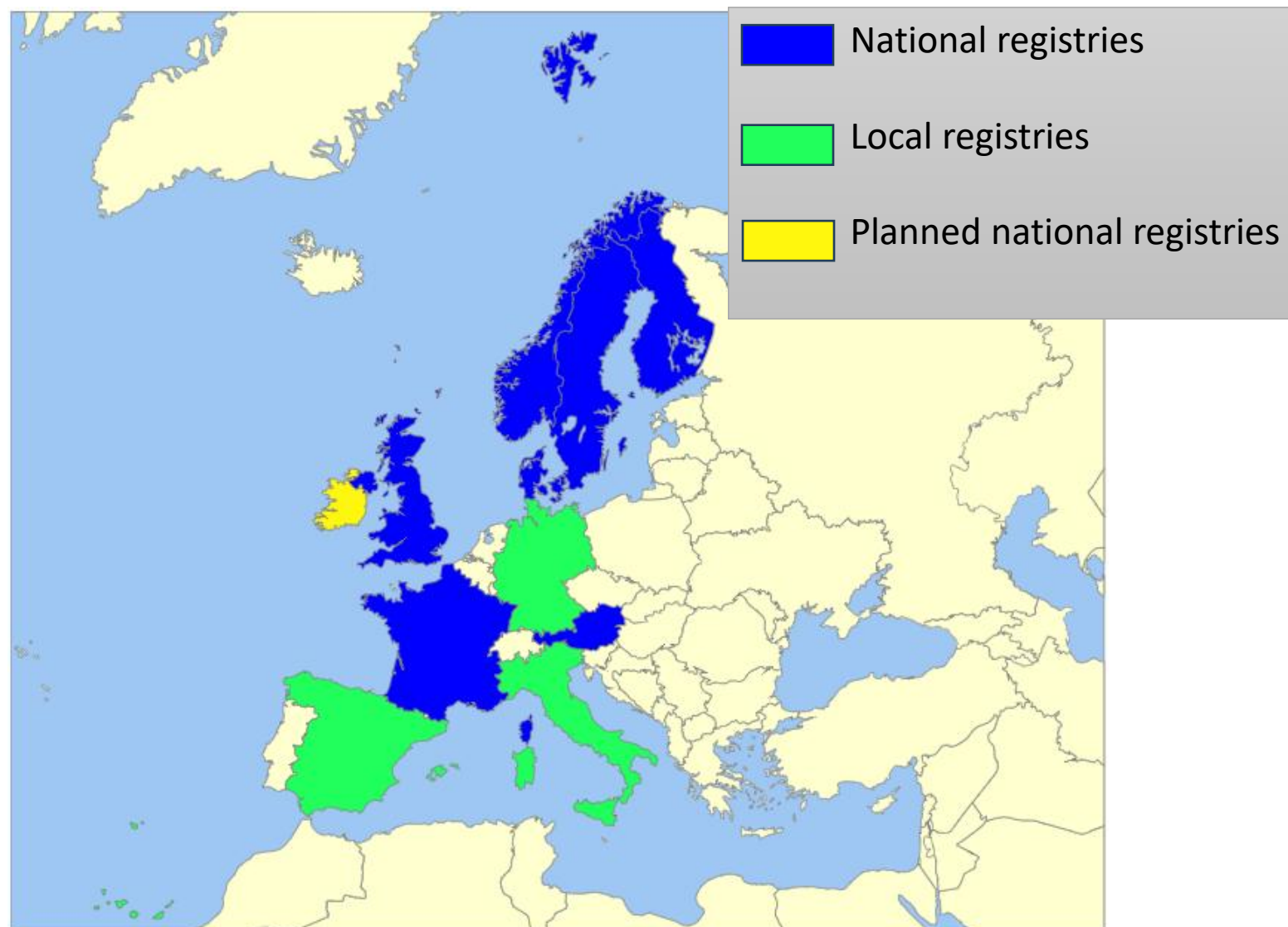
²Lang L, et al. Prevalence and determinants of undetected dementia in the community: a systematic literature review and a meta-analysis. BMJ Open. 2017 Feb 3;7(2):e011146

³<https://www.ucr.uu.se/svedem/resultat/arsrapporter/arsrapporter/svedem-arsrapport-2024>

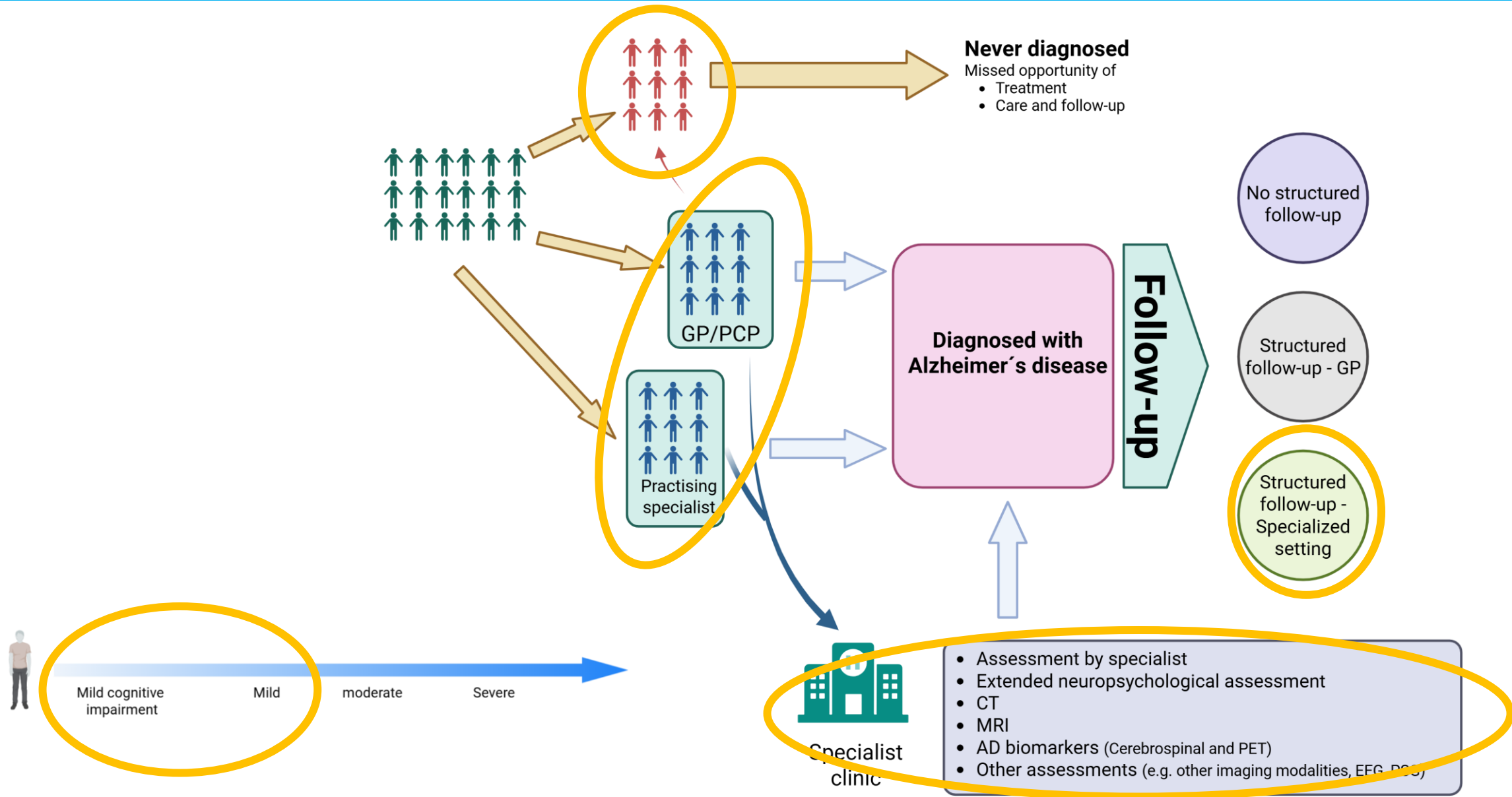
Frederiksen KS, et al. Biomarker counseling, disclosure of diagnosis and follow-up in patients with mild cognitive impairment: A European Alzheimer's disease consortium survey. Int J Geriatr Psychiatry. 2021 Feb;36(2):324-333.

Current status – Patient registries

- No pan-European registry
- Few national registries
- Variable coverage and setting
 - Dementia
 - Dementia+MCI
 - Epidemiology vs. Quality of care
 - Cross-sectional vs. longitudinal



Transformation of Diagnostic pathways with ATTs



Prerequisite for treatment and RWE generation

- Case finding at the level of primary care
- Precise triaging to specialised center for those possibly eligible for treatment
- Increased capacity for diagnosis and follow-up in specialised centers

Coverage

- Need to have: All patients on anti-amyloid therapies (and considered for anti-amyloid therapies)
- Nice to have: All patients evaluated for cognitive impairment

Outcome measures of effectiveness and safety

- Capturing only outcomes that are relevant to anti-amyloid therapies
- Minimum of data points to ensure feasibility and coverage of registry
 - Assessment tools that are minimally time consuming
- Compliant with the SmPC

Role of funders

- Industry versus public funder
- Ensure independence, sustainability and data protection

Others

- Implementation of automation were possible (e.g automatic data capture from electronic patient charts)
- Avoid redundant data capture (e.g. in cases with more than one registry)
- **European Health data space**