



## Clinical-Neuroimaging-Pathology Symposium on Dementia With Lewy Bodies

### Thursday, December 3 – 7-10 pm

#### Overview

Diagnostic errors are common in the assessment of individuals with cognitive impairment and dementia. Advances in biomarkers, particularly in the Alzheimer's disease (AD) arena, have not only improved diagnostic accuracy, but also fostered increased attention and research into the identification of individuals with prodromal or presymptomatic disease. Pathologic evidence supporting or refuting underlying AD was critical in substantiating the clinical and research utility of CSF tau and beta-amyloid quantification, structural MRI, FDG-PET, amyloid PET, etc. Clinical trials are now in progress in those with mild dementia, mild cognitive impairment as well as no cognitive symptoms at all who have biomarker evidence of underlying AD pathology. *This evolution of clinical-neuroimaging-pathologic correlations forming the foundation of clinical trial design has served the AD field well.* However, there is far less data on the clinical-neuroimaging-pathologic correlations in DLB.

#### Clinical-Neuroimaging-Pathology Symposium on DLB

With the advances in neuroimaging (eg, DaTscan imaging, amyloid PET imaging, tau PET imaging, MIBG imaging, etc.), the clinical-neuroimaging-pathologic correlations which have been carried out at specialized academic centers (many of which are unpublished) since the last International DLB Conference, and the rare circumstance of hundreds of clinicians and researchers being in one location, all fostered the development of the **Clinical-Neuroimaging-Pathology Symposium on DLB** during the International DLB Conference in Fort Lauderdale. This symposium will involve the following:

- 3 hour session on Thursday, December 3, from 7 to 10 pm
- Involve clinicians (neurologists, psychiatrists, internists, family physicians, etc.), neuropsychologists, neuroradiologists and neuropathologists (and any other interested parties) who are attending the conference
- Overview presentations (30 min total) on the primary neuroimaging studies used in dementia (eg, MRI, FDG-PET, amyloid PET, DaTscan, tau PET, MIBG)
- Five cases (30 min each) with clinical data, neuropsychological data, neuroimaging findings and pathologic findings presented; each case presented over 15 min, with 15 min discussion
- A neurologist or psychiatrist, neuropsychologist, neuroradiologist and neuropathologist would be presenters/discussants for each case
- Each case would be selected as illustrative cases to underscore the value of one or more imaging studies in supporting or refuting LBD (+/- AD or vascular)
- Each would be presented as "what is it" case for the audience to suggest the underlying pathology based on the clinical synopsis, neuropsychologic data and imaging findings. The neuropathologist would then show the findings—similar to standard clinicopathologic conference (CPC) cases

#### Objectives

This symposium will therefore provide a forum to:

- 1) promote interactions among colleagues from various disciplines
- 2) incorporate information from key instructive CPC cases along with the concepts and data from the platform and poster presentations from Sessions 1-12
- 3) shape discussions for Sessions 13-16 and post-conference deliberations as updates on DLB-related research and clinical practice plans are further refined