

Corso di Aggiornamento AINV2024

La disautonomia nella pratica clinica: diagnosi e strategie terapeutiche

Ipoperfusione cerebrale e deficit cognitivo

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CLINICA NEUROLOGICA
UNIVERSITA' POLITECNICA DELLE MARCHE

Treia, 4 ottobre 2024



Sin
SOCIETÀ ITALIANA DI NEUROLOGIA

Pure AD

AD with severe cerebral amyloid angiopathy

Mild AD with vascular involvement

AD with vascular lesions

AD with CVD

VaD with vascular changes

VaD with small-vessel diseases

Pure VaD



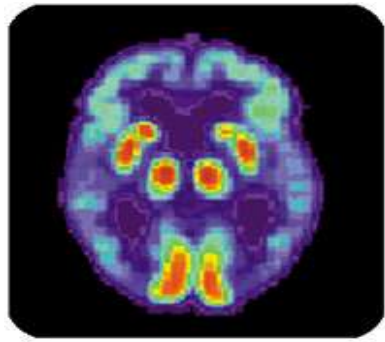
Aggregation of vascular risk factors and risk of incident Alzheimer disease

J.A. Luchsinger, MD, MPH; C. Reitz, MD; L.S. Honig, MD, PhD; M.-X. Tang, PhD; Steven Shea, MD, MS;
and R. Mayeux, MD, MSe

CONVERGING PATHOGENIC MECHANISMS IN VASCULAR AND NEURODEGENERATIVE DEMENTIA

C. Iadecola, Stroke 2003





ALZHEIMER'S DISEASE

AMYLOID HYPOTESIS

Abnormal APP cleavage

A β deposition

Senile plaques

Neurodegeneration

AD



VASCULAR HYPOTESIS

Advanced ageing and vascular risk factor

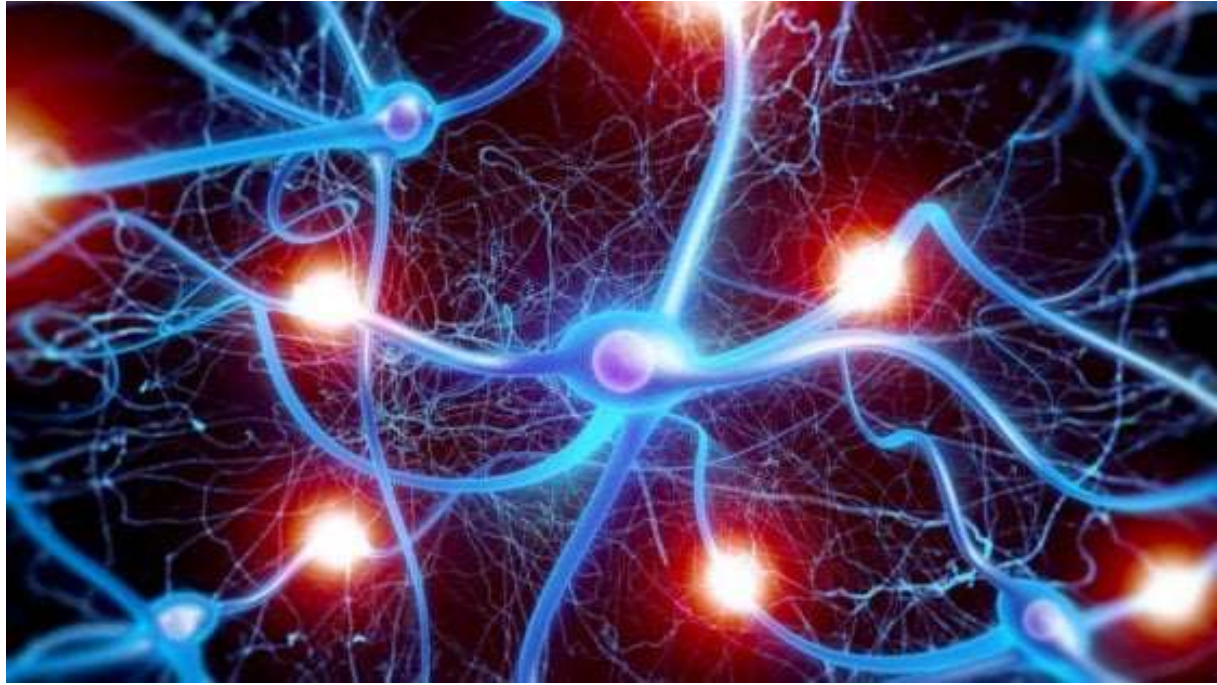
Brain hypoperfusion

Neuroglial energy crisis

Mild cognitive impairment

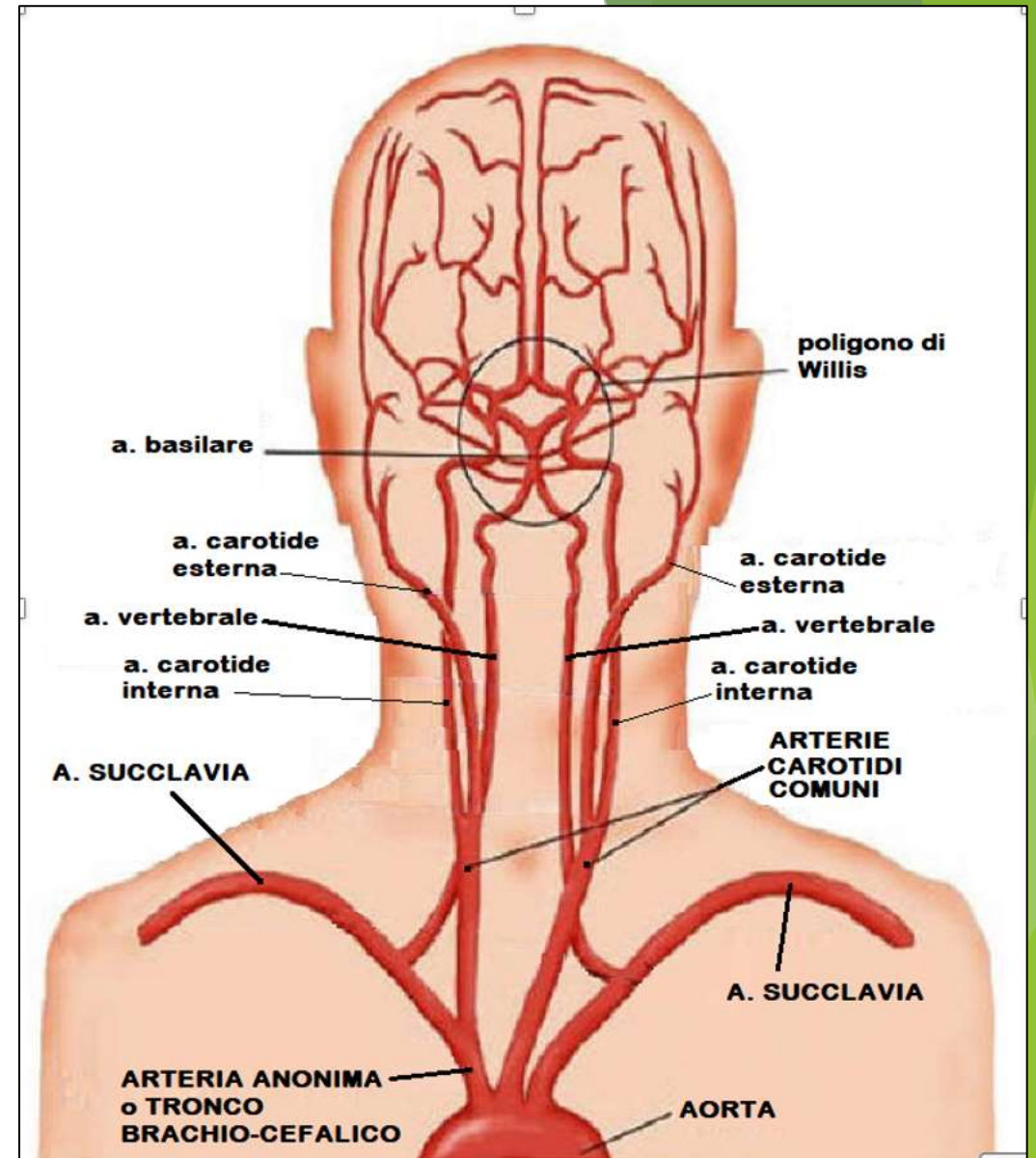
Neurodegeneration

AD

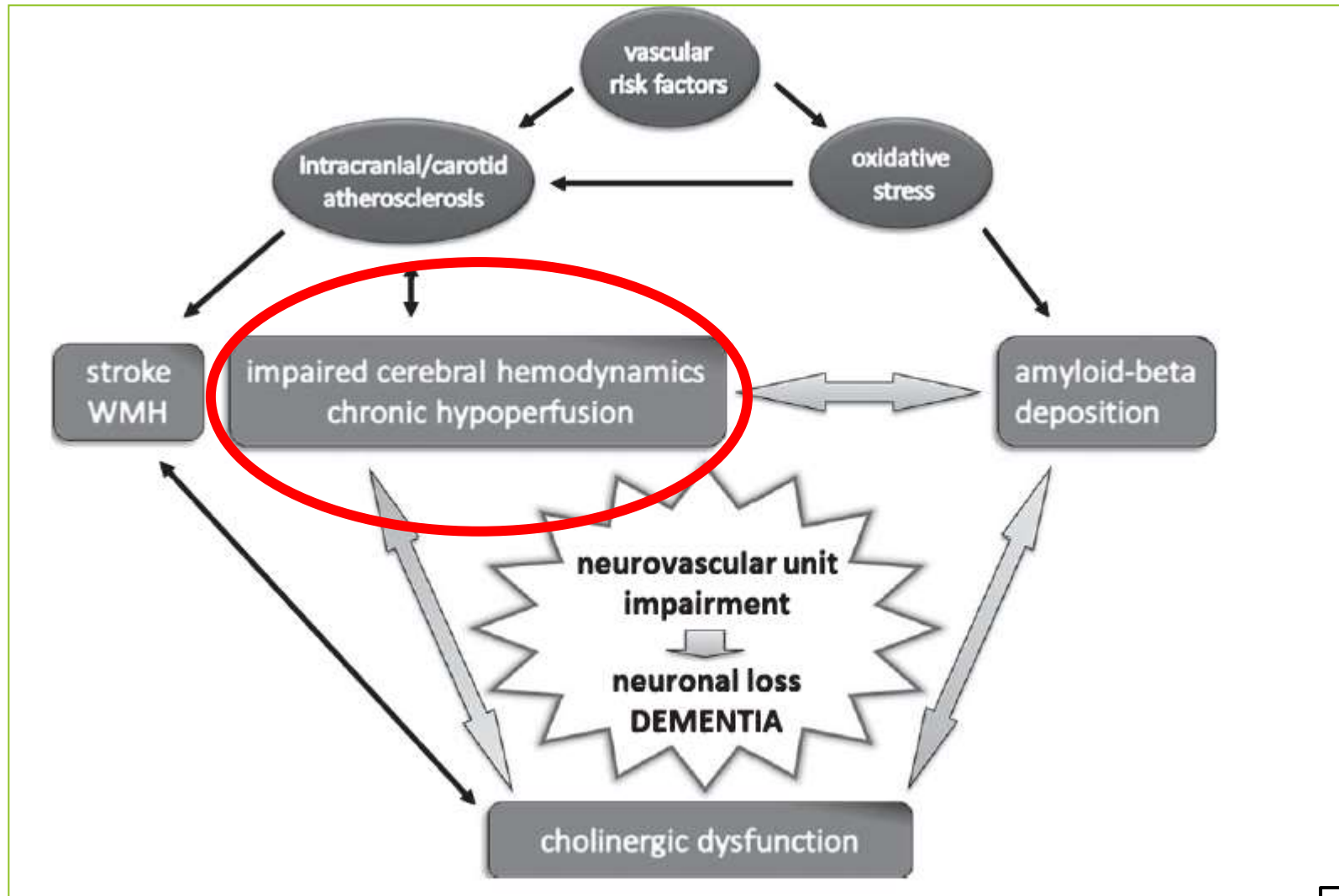


Cerebral hemodynamics play an important role in maintaining coordinated flow responses in the brain as neuronal tissues require tight coordination between neuronal activity and CBF within the brain parenchyma

(NEUROVASCULAR COUPLing).



VASCULAR RISK FACTORS & COGNITIVE IMPAIRMENT



Age-related vascular changes



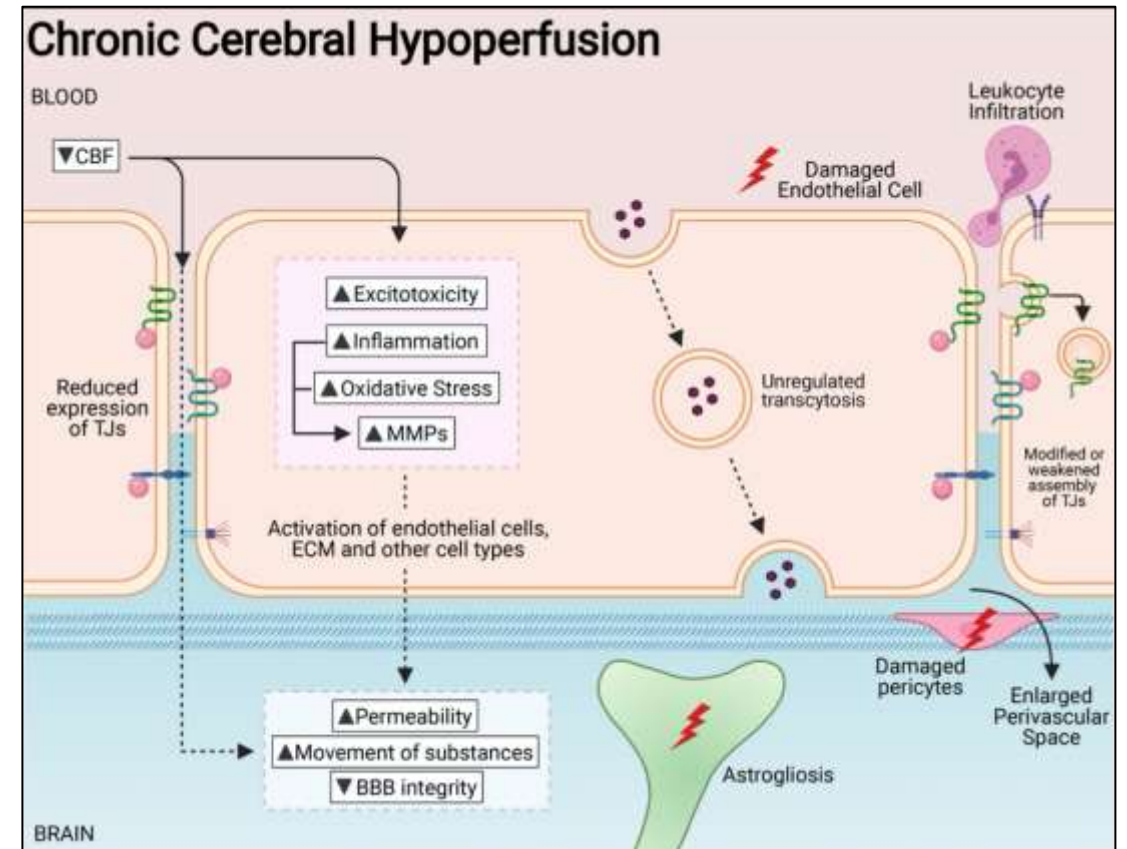
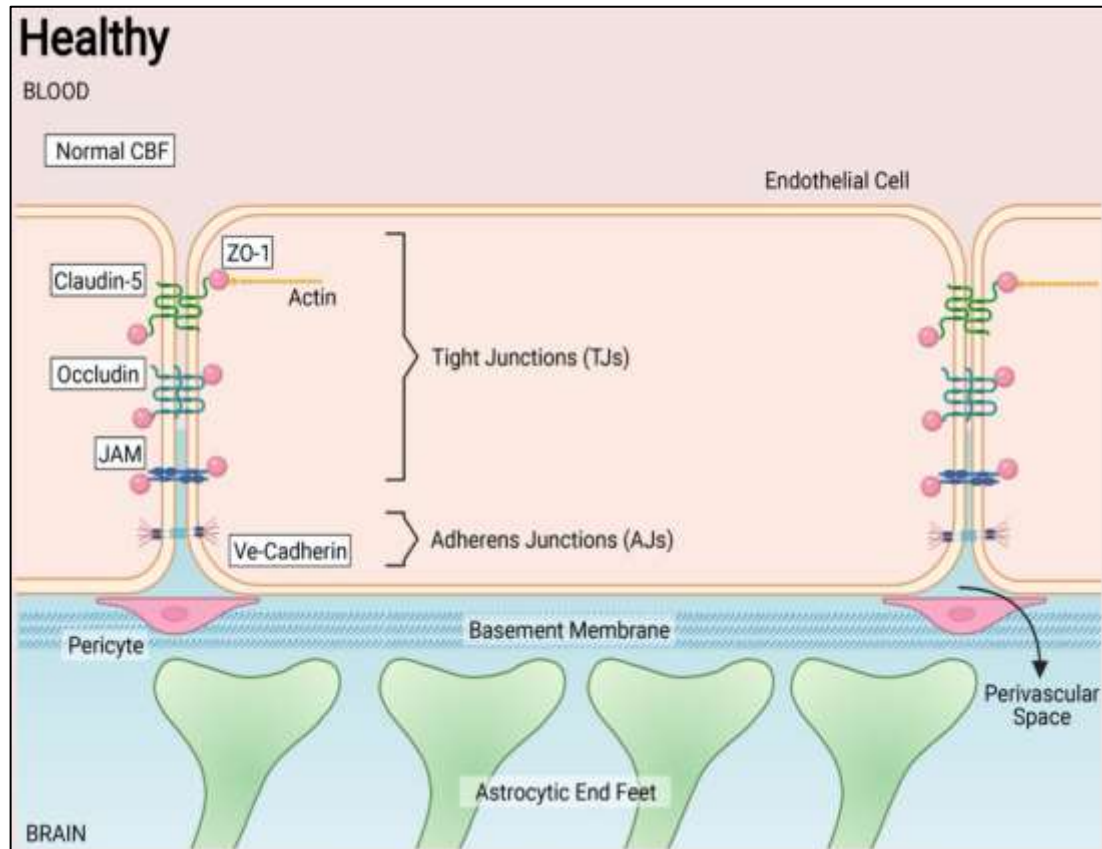
**CHRONIC
CEREBRAL
HYPOPERFUSION**

CHRONIC INFLAMMATION
OXIDATIVE STRESS
NEURODEGENERATION
BRAIN ATROPHY



WHITE MATTER LESIONS

BLOOD BRAIN BARRIER



Age-related vascular changes



CHRONIC
CEREBRAL
HYPOPERFUSION



CHRONIC INFLAMMATION
OXIDATIVE STRESS
NEURODEGENERATION
BRAIN ATROPHY



WHITE MATTER LESIONS



DEMENTIA



PATHOPHYSIOLOGICAL CHANGES
BLOOD-BRAIN BARRIER DYSFUNCTION
ENDOTHELIAL DYSFUNCTIONS

Chao 2010

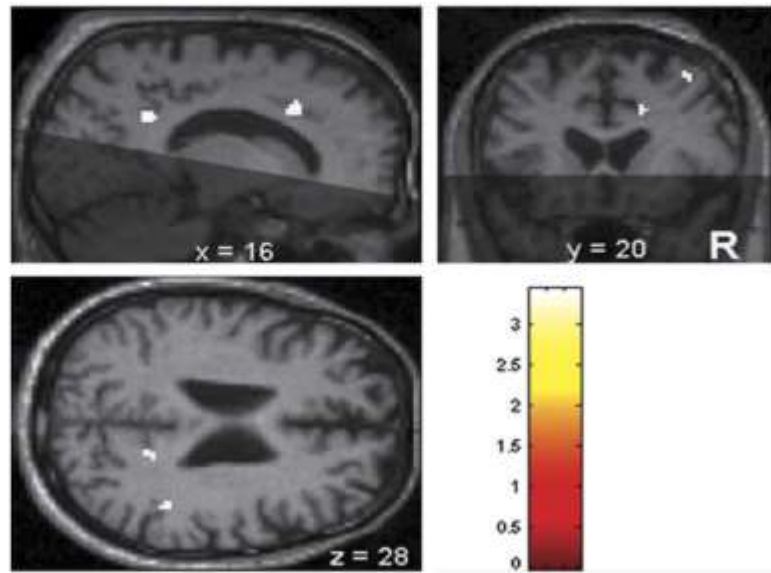
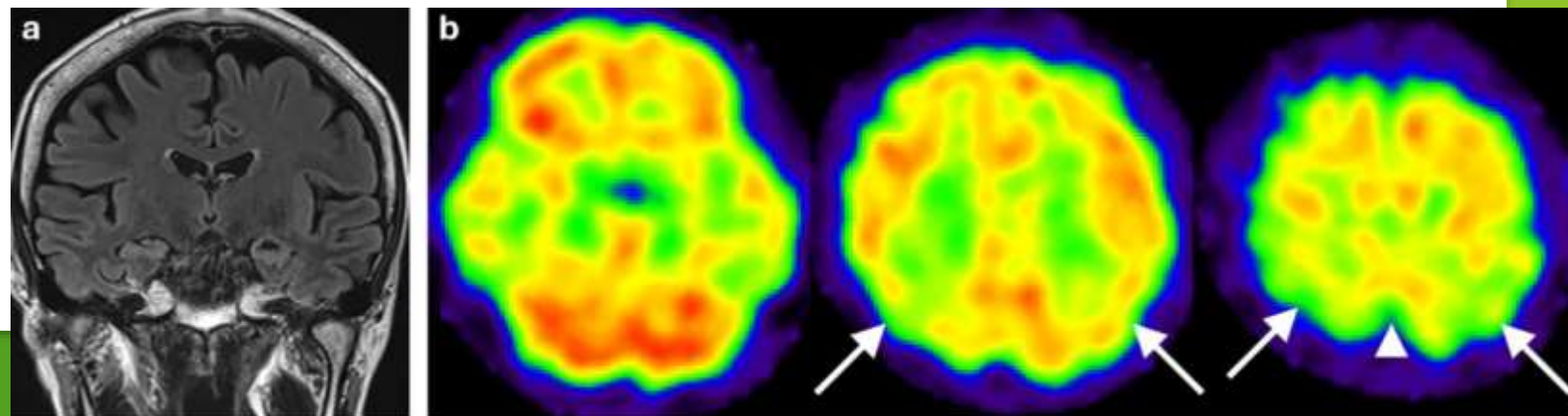
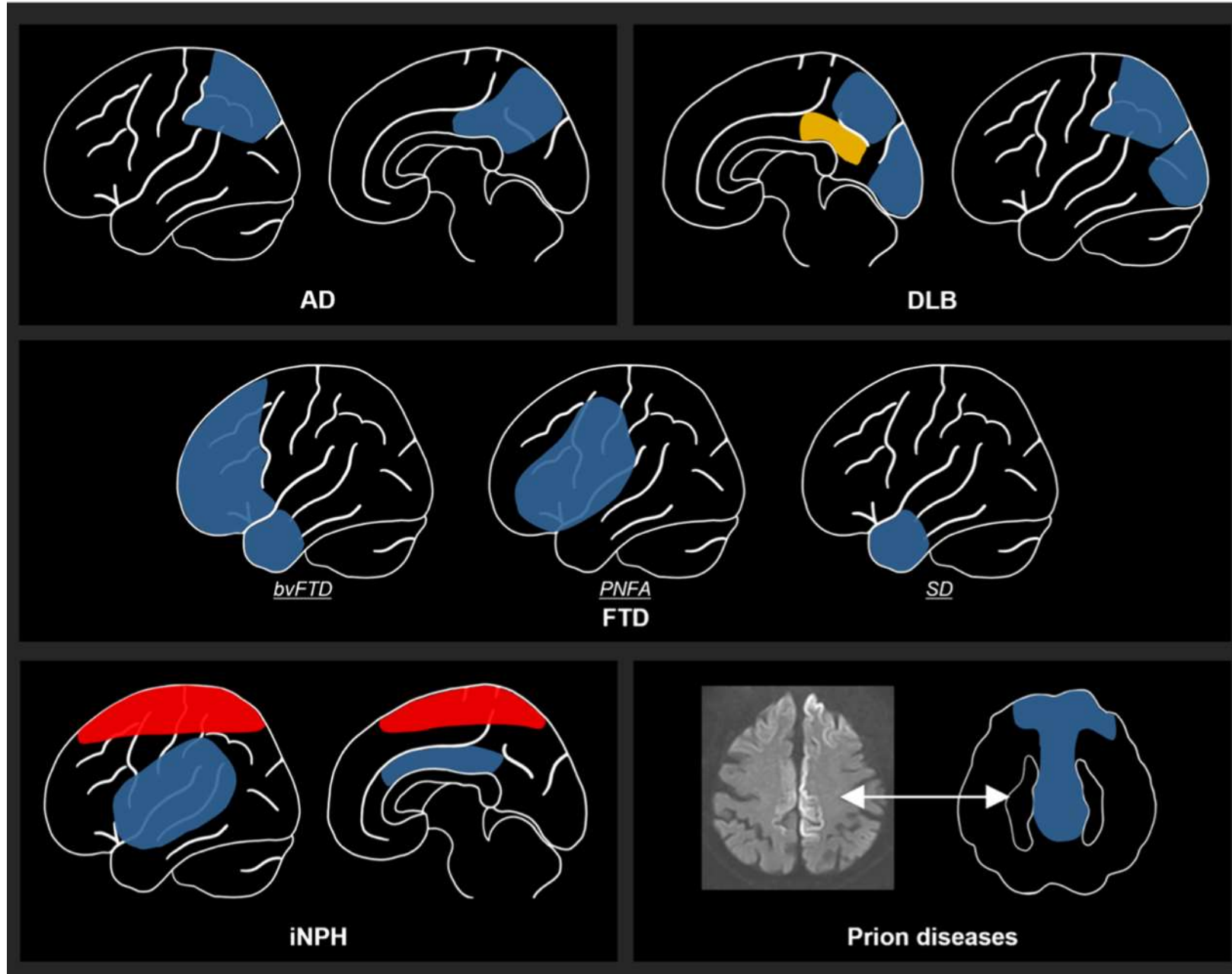


FIGURE 1. Statistical parametric maps showing regions of hypoperfusion in the 13 mild cognitive impairment subjects who converted to dementia relative to the 35 mild cognitive impairment subjects who remain nondemented. Converters had hypoperfusion in the right precuneus/posterior cingulum (shown in the sagittal and axial slices), right middle cingulum (shown in the sagittal and coronal slices), right middle frontal cortex (shown in the coronal slice), and right inferior parietal cortex (shown in the axial slice). The shaded areas in the sagittal and coronal slices represent regions not covered by our implementation of arterial-spin labeling magnetic resonance imaging.

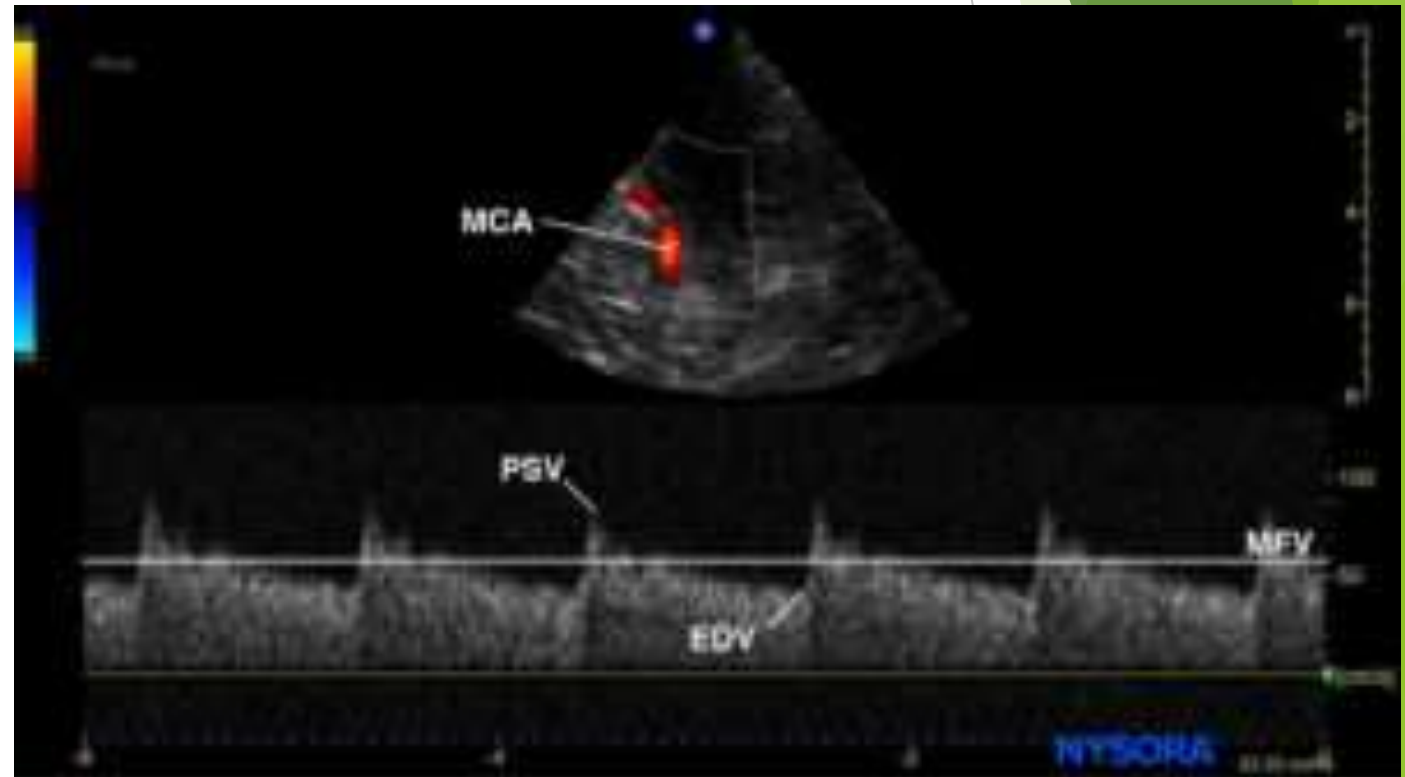
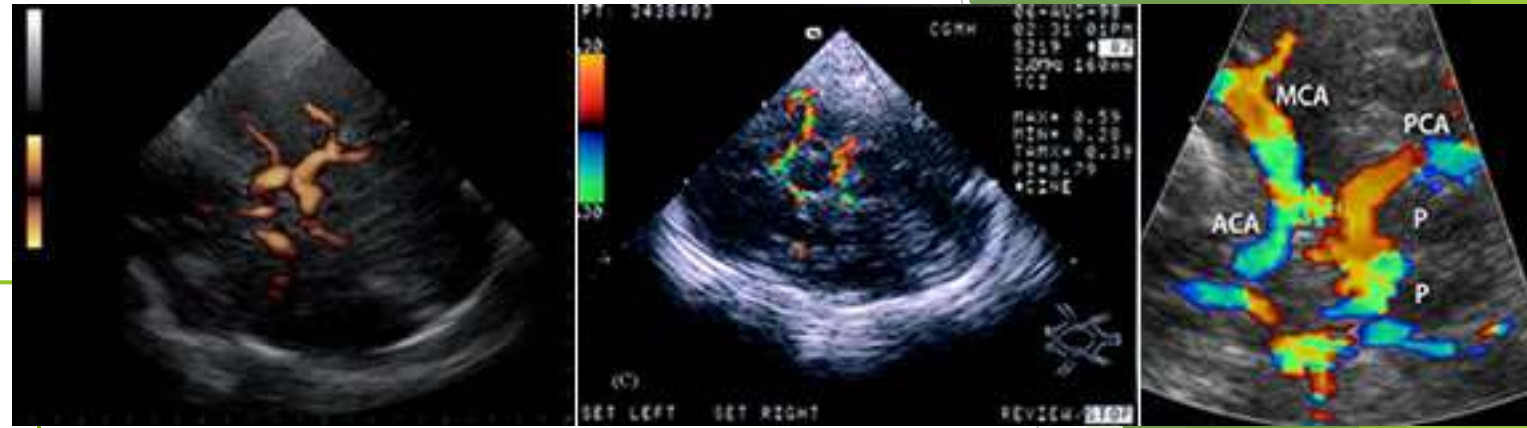
Imokava 2024



Schematic drawings of typical perfusion patterns



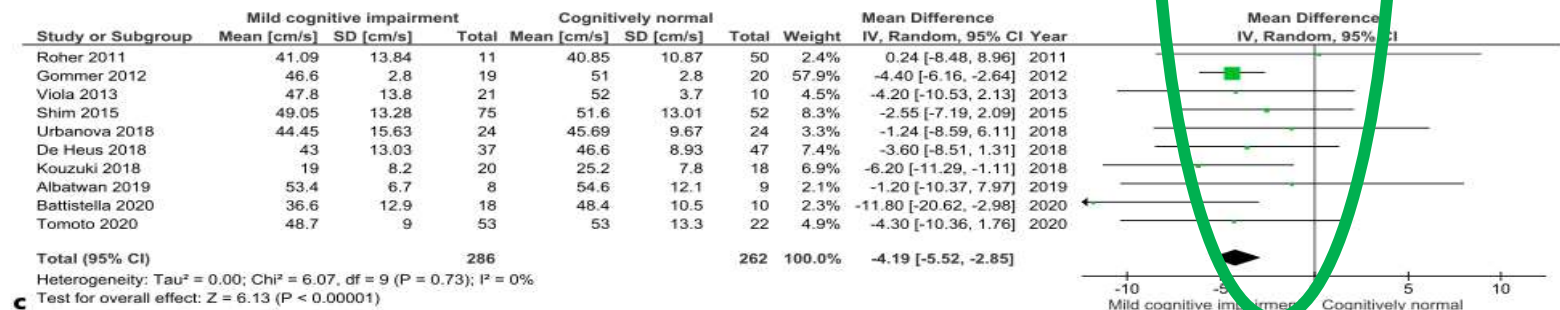
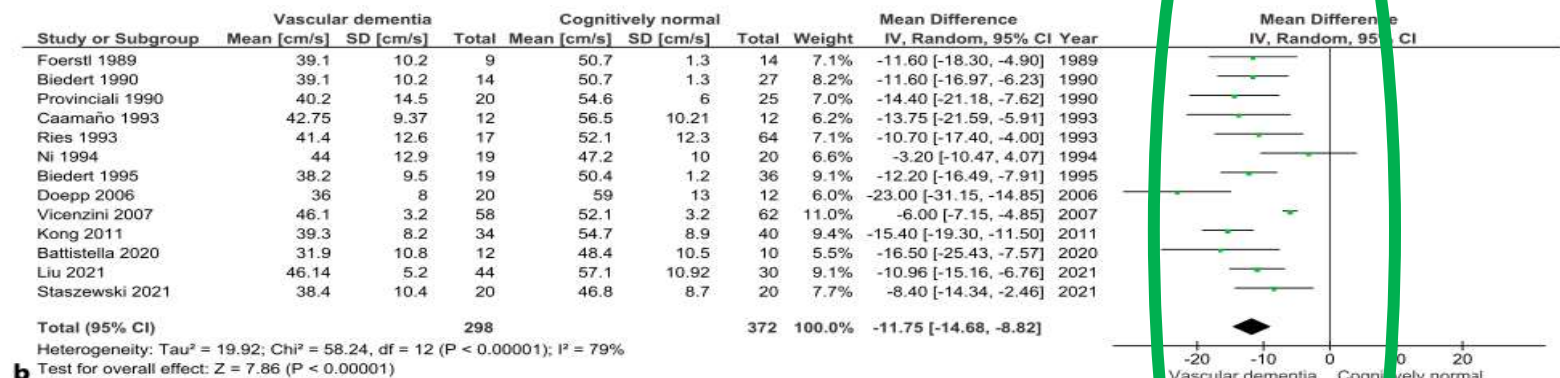
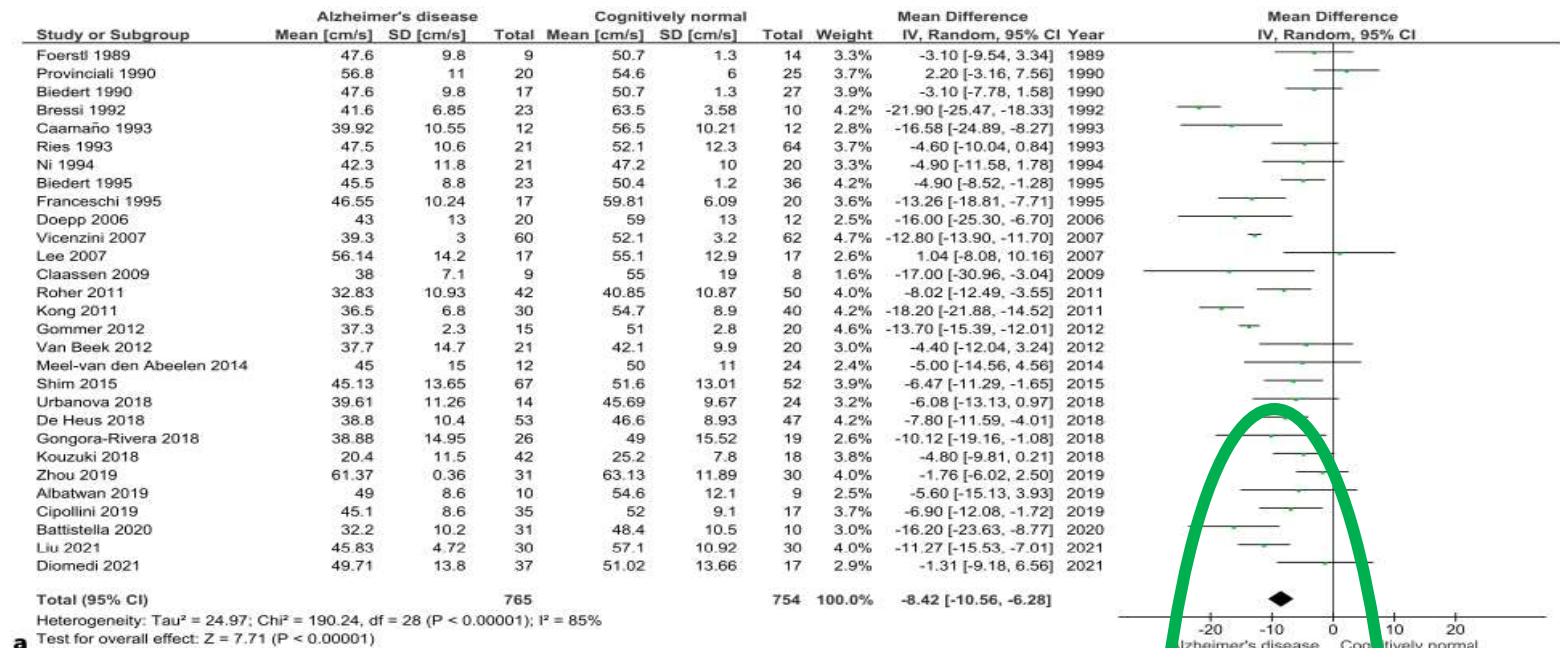
CEREBRAL BLOOD FLOW AND PERFUSION: TRANSCRANIAL ECODOPPLER AND ECOCOLORDOPPLER



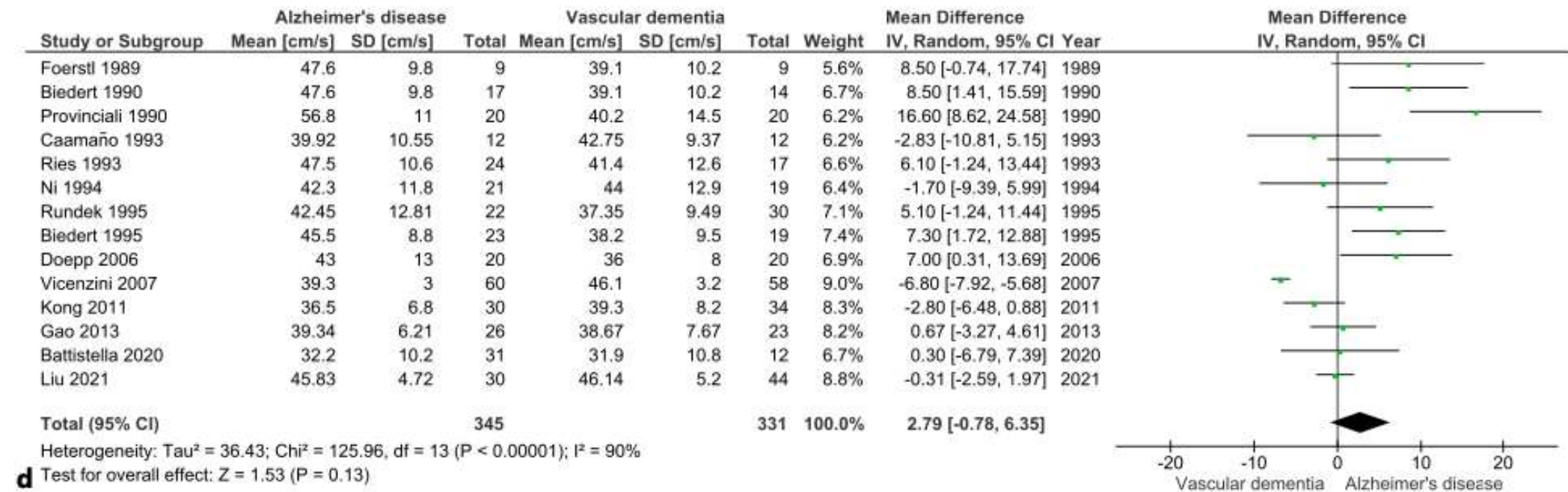
Cerebrovascular Hemodynamics in Cognitive Impairment and Dementia: A Systematic Review and Meta-Analysis of Transcranial Doppler Studies

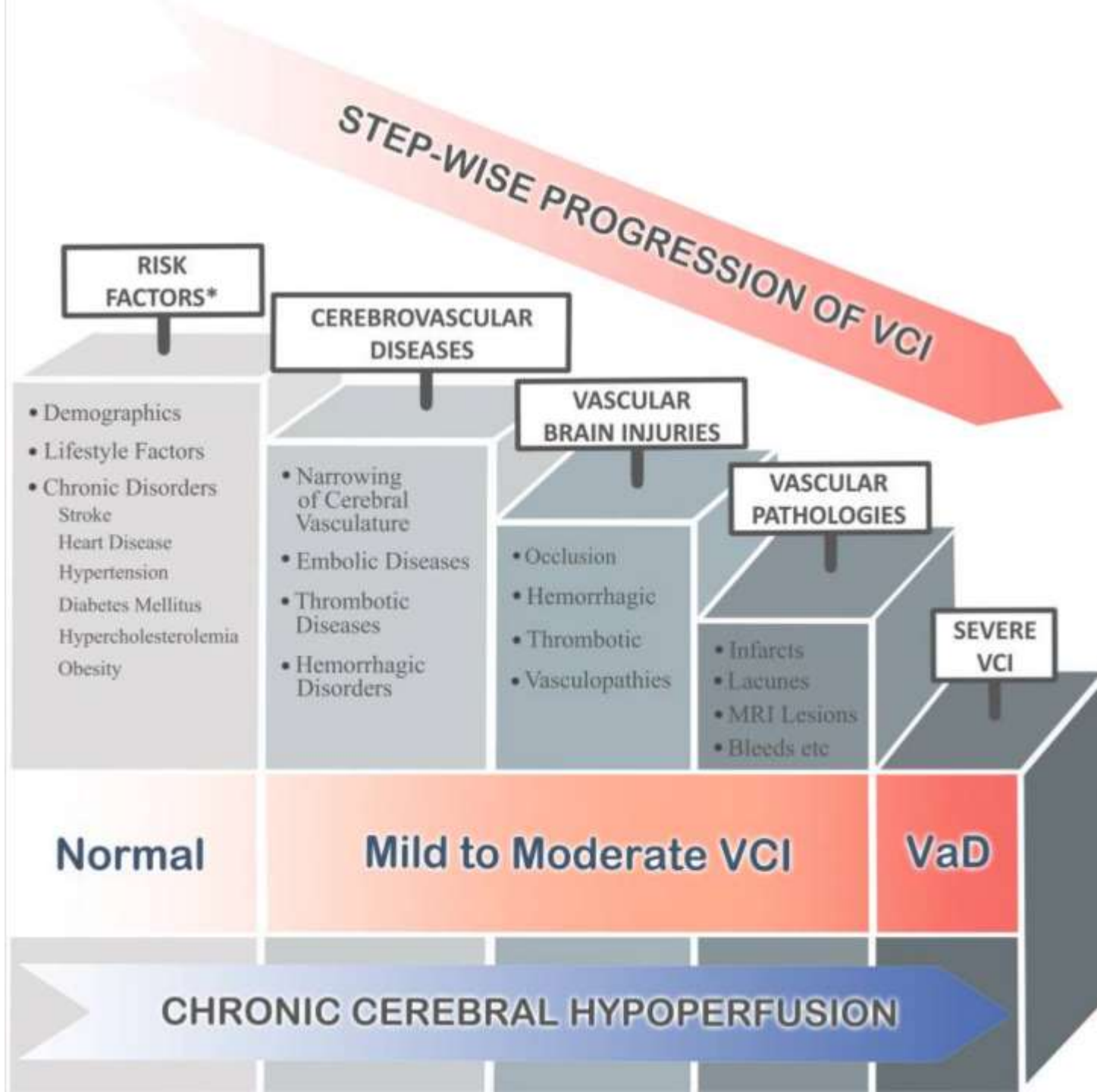
Dementia and Geriatric Cognitive Disorders

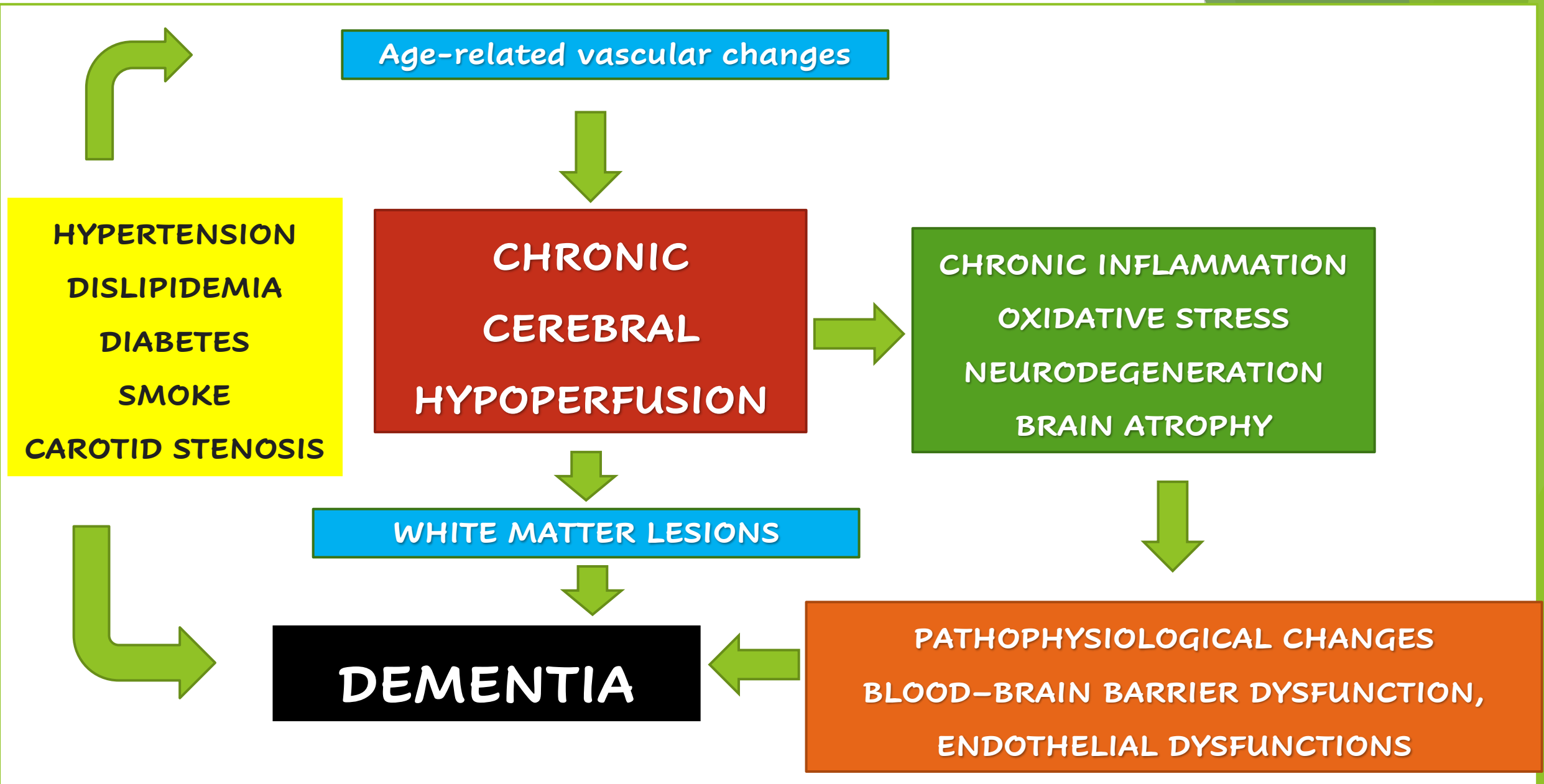
Fresnais 2023



Cerebrovascular Hemodynamics in Cognitive Impairment and Dementia: A Systematic Review and Meta-Analysis of Transcranial Doppler Studies







CAROTID STENOSIS

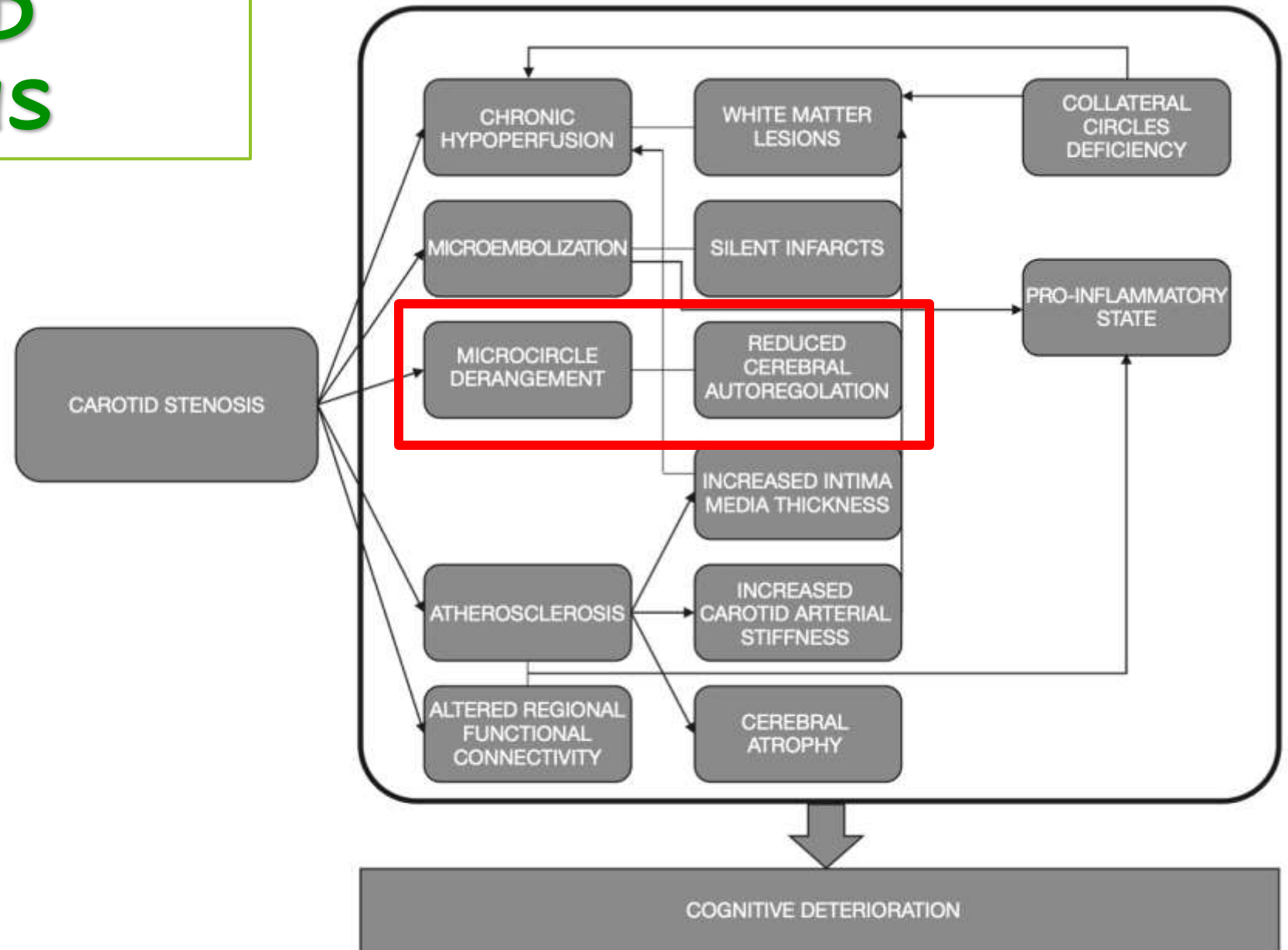
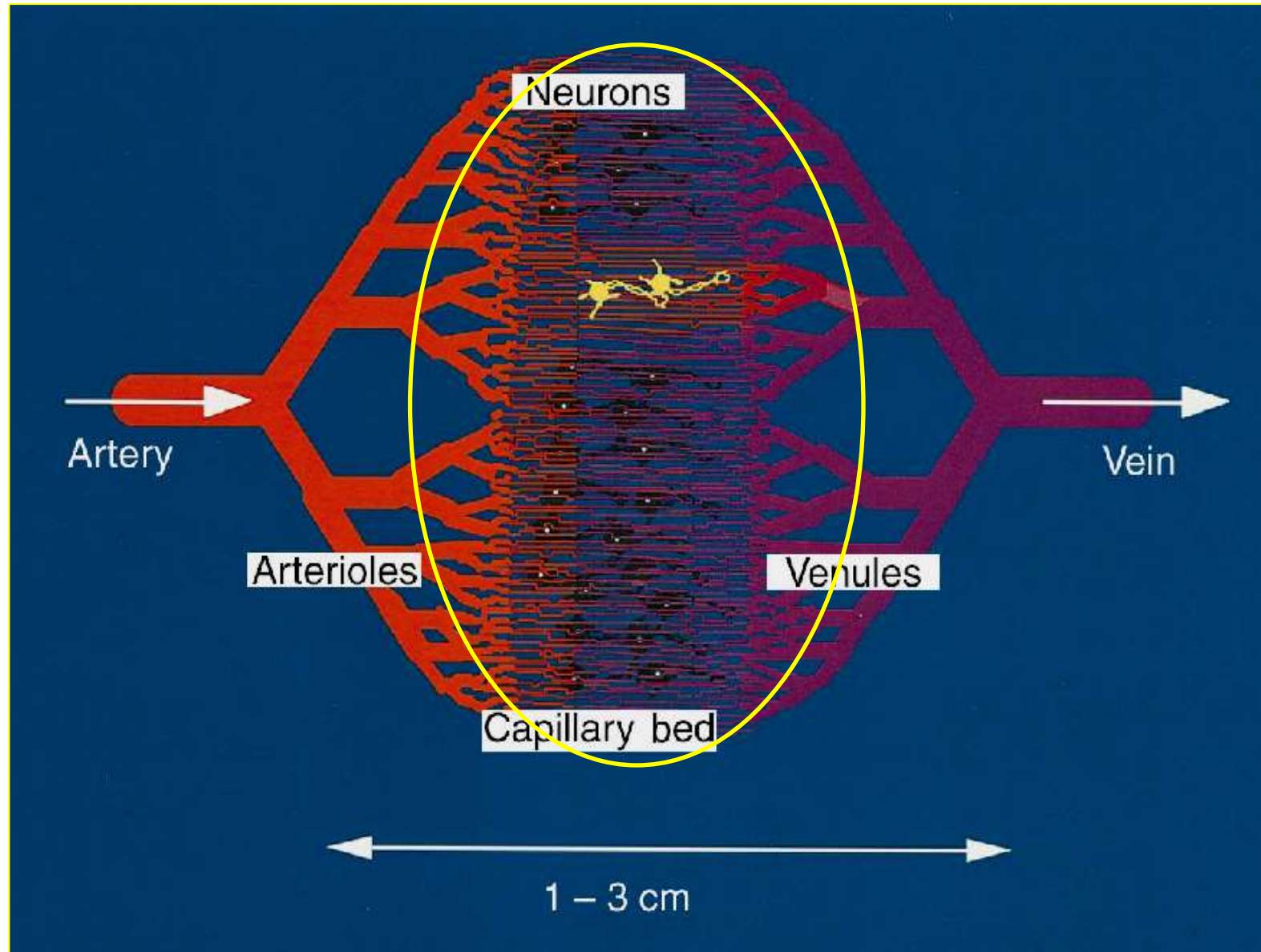


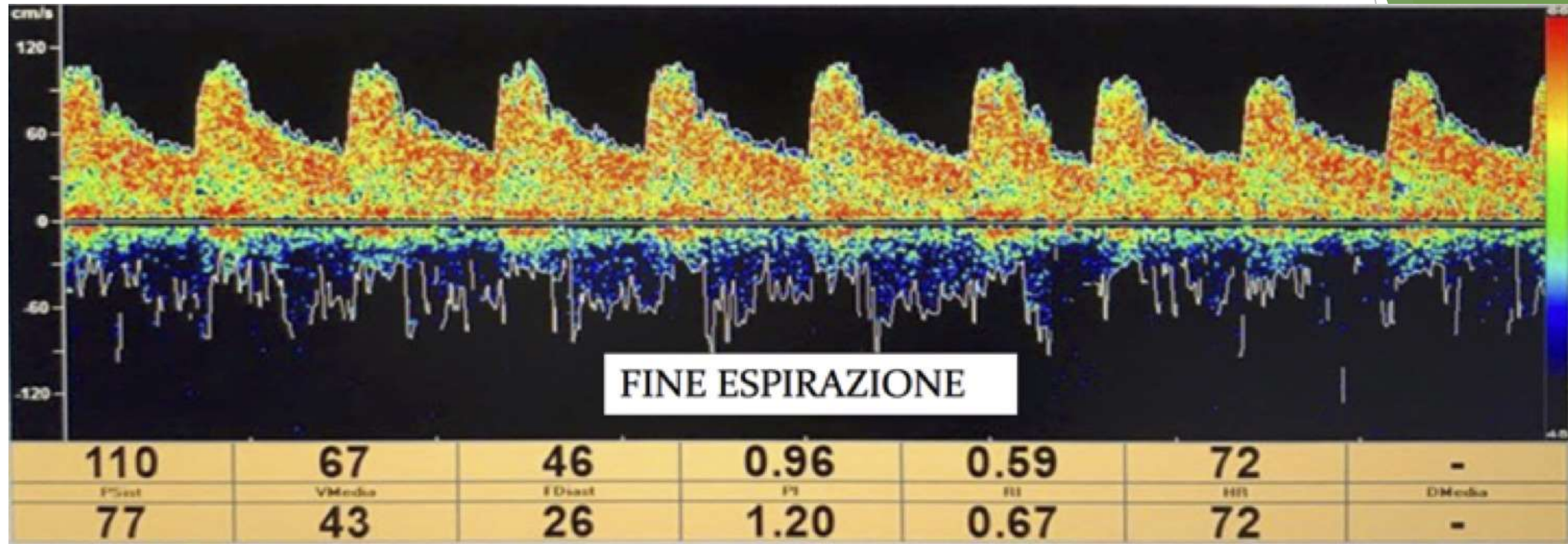
Figure 1 Proposed mechanisms for the association between carotid stenosis and cognitive impairment.

CEREBROVASCULAR REACTIVITY



CO_2

BREATH-HOLDING INDEX (BHI)

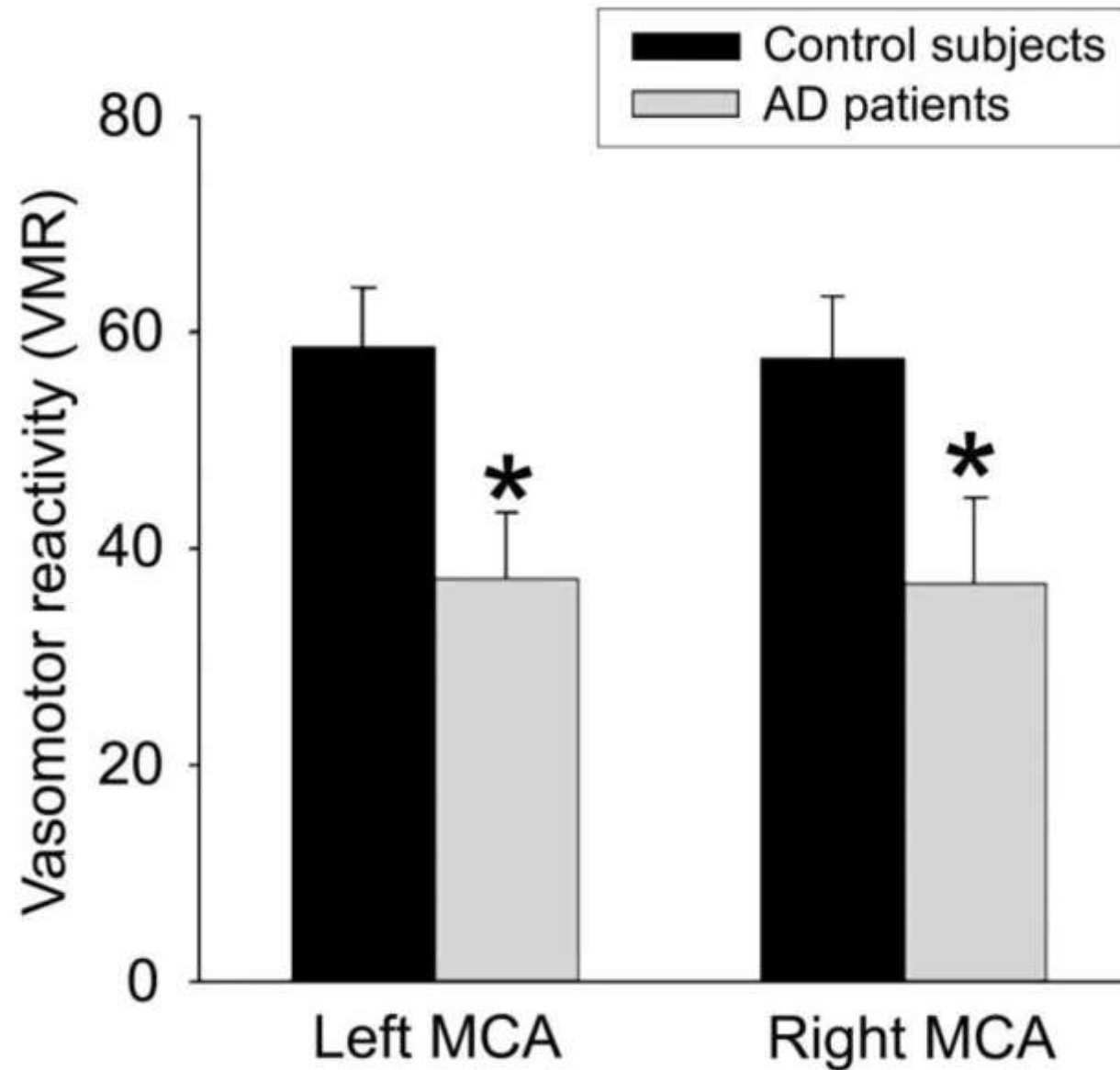


► $BHI = (MFV \text{ alla fine dell'apnea} - MFV \text{ a riposo} / MFV \text{ a riposo}) \times 100$
/ tempo di apnea in secondi

MFV= mean flow velocity

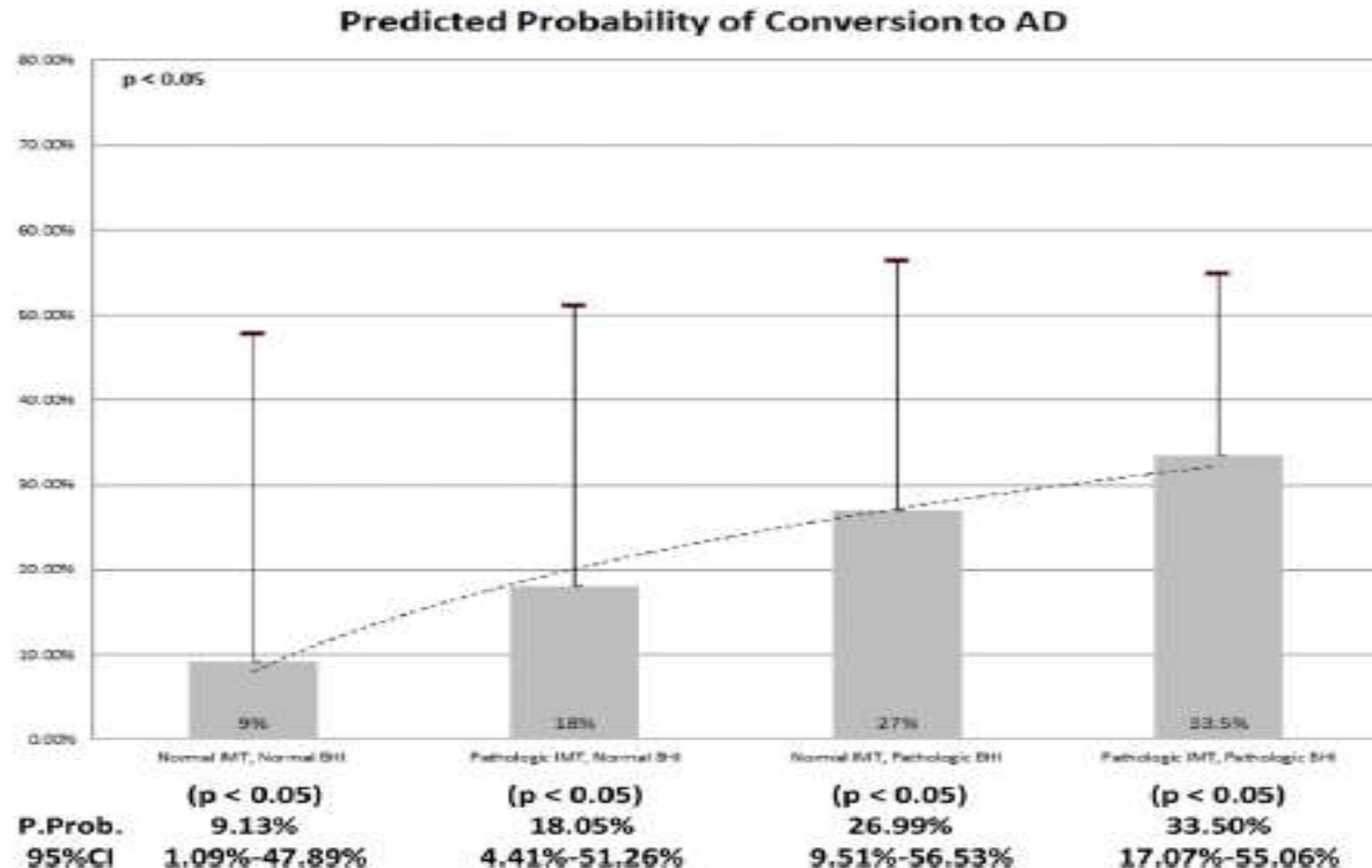
Il valore di $BHI \leq 0.69$ è stato preso come cut-off patologico.

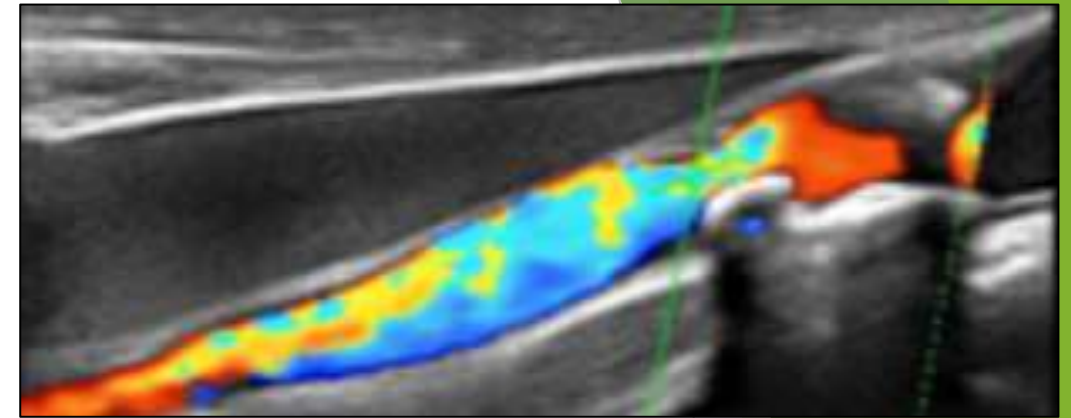
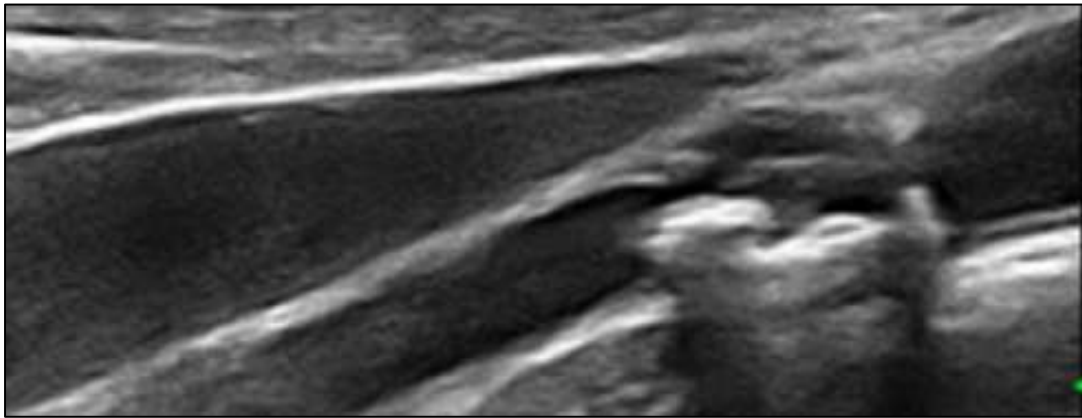
Decreased Vasomotor Reactivity in Alzheimer's Disease



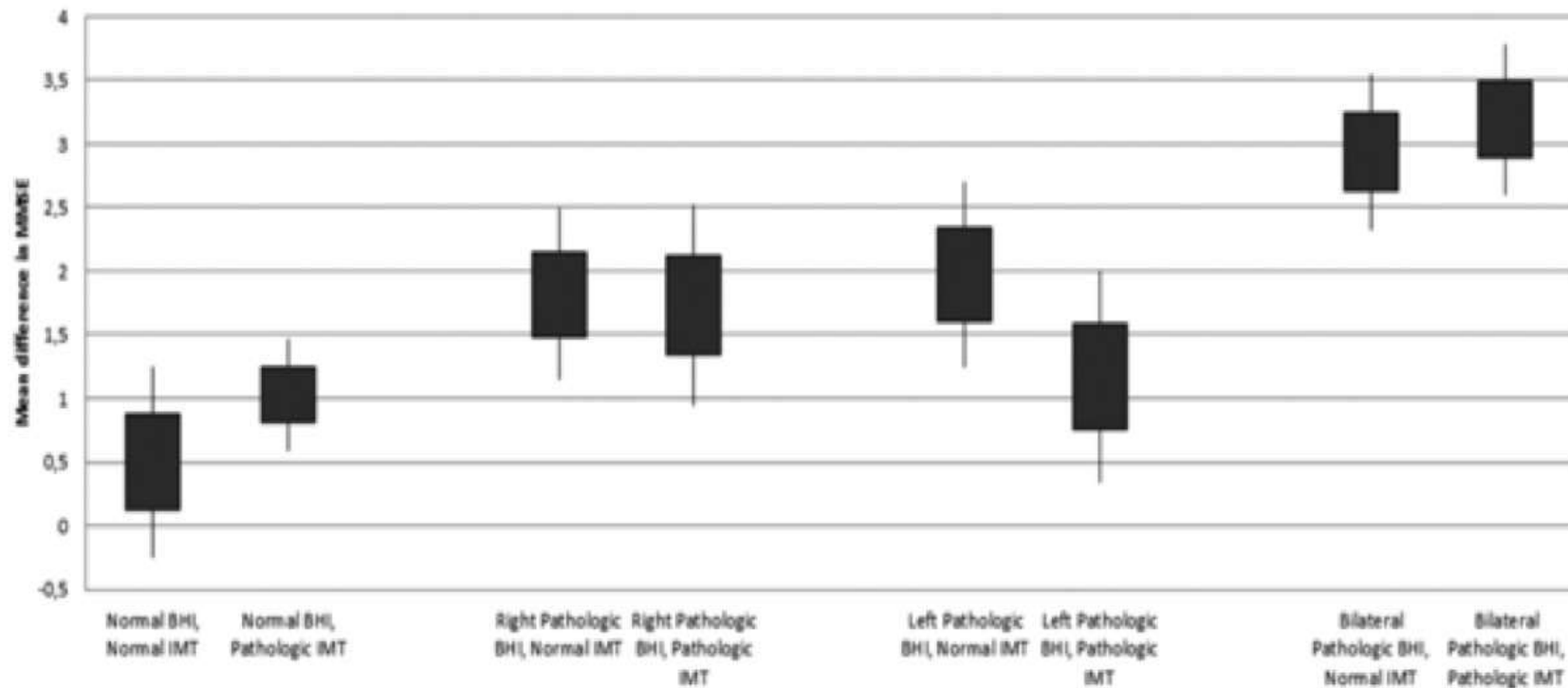
Vascular predictors of cognitive decline in patients with mild cognitive impairment

Giovanna Viticchi^a, Lorenzo Falsetti^b, Fabrizio Vernieri^c, Claudia Altamura^c,
Marco Bartolini^a, Simona Luzzi^a, Leandro Provinciali^a, Mauro Silvestrini^{a,*}



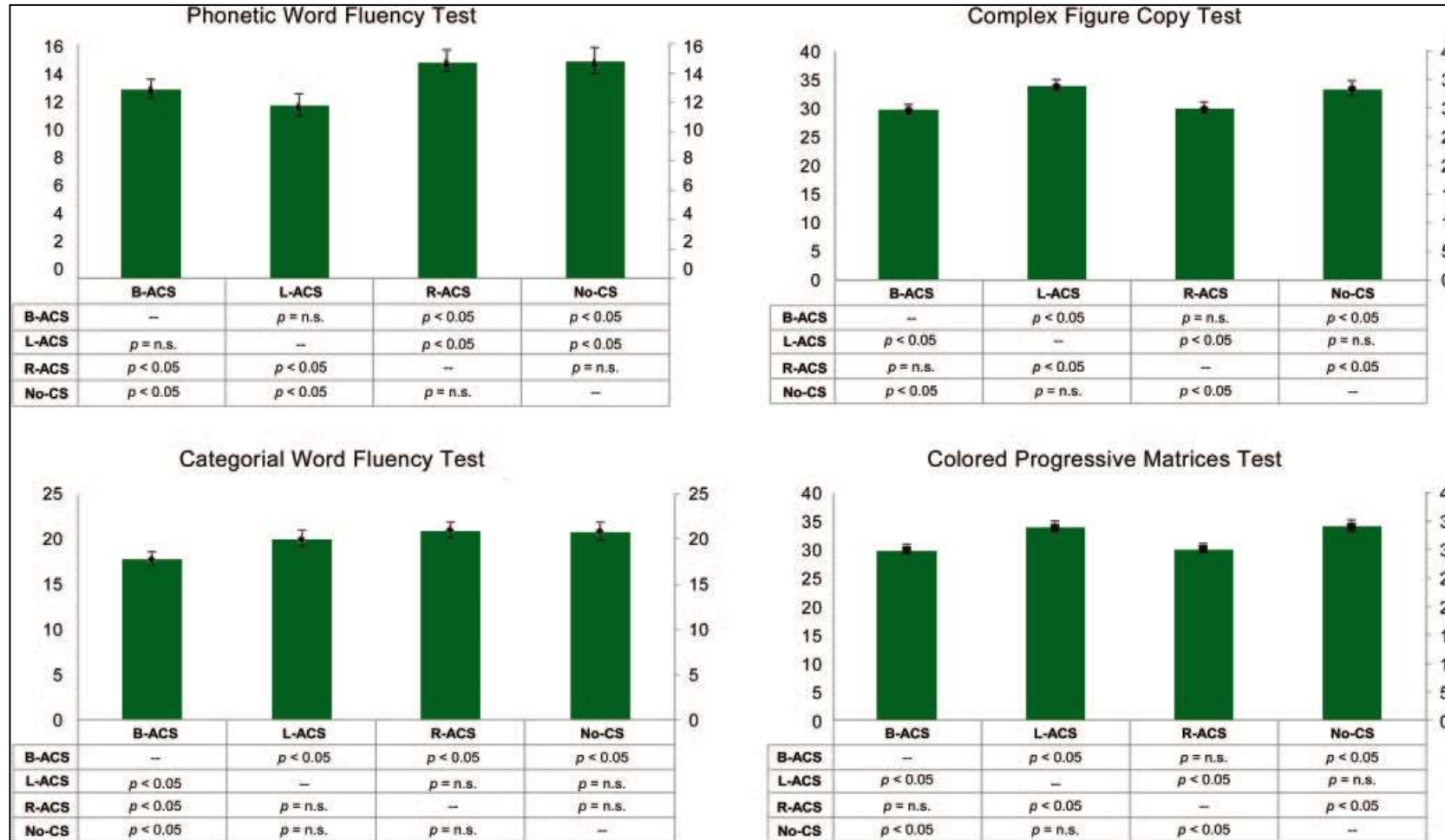


Differences in mean MMSE at 3 years in patients affected by bilateral carotid artery stenosis considering BHI and IMT

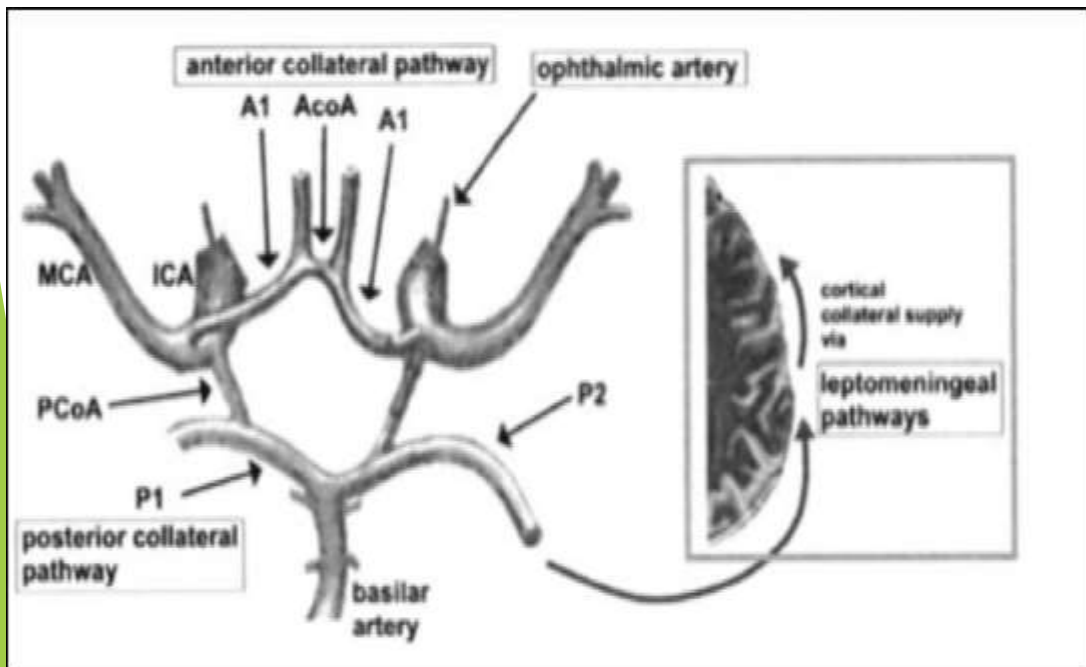


Clotilde Balucani, MD
 Giovanna Viticchi, MD
 Lorenzo Falsetti, MD
 Mauro Silvestrini, MD

Cerebral hemodynamics and cognitive performance in bilateral asymptomatic carotid stenosis



CAROTID OCCLUSION



B. via del circolo del Willis

a. comunicante anteriore

a. cerebrale anteriore

a. cerebrale media

a. oftalmica

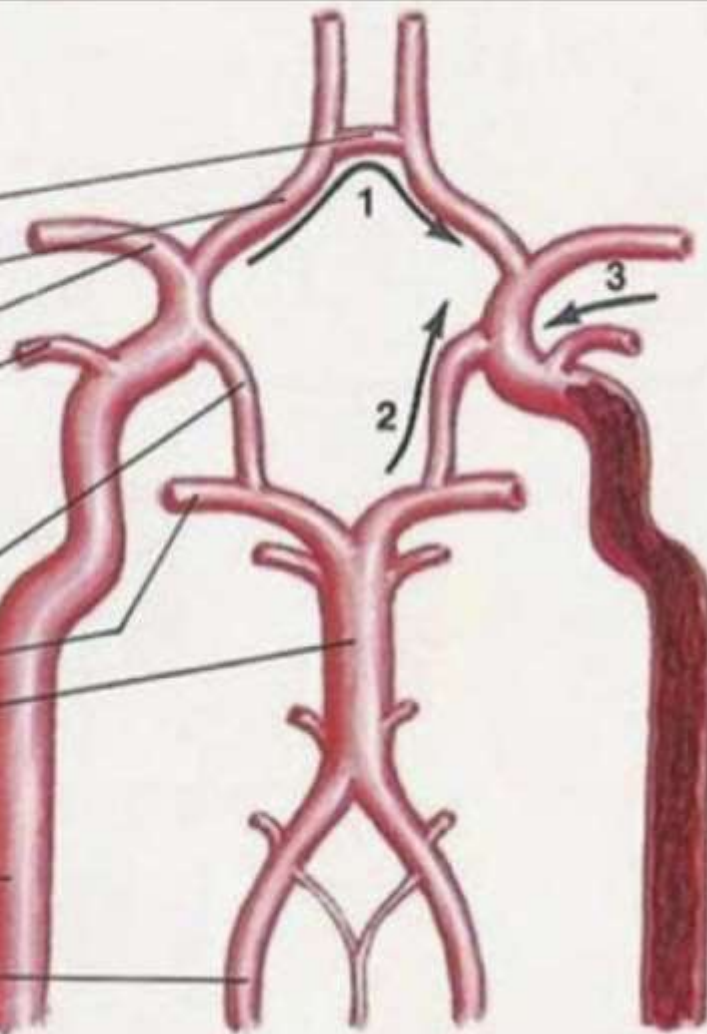
a. comunicante posteriore

a. cerebrale posteriore

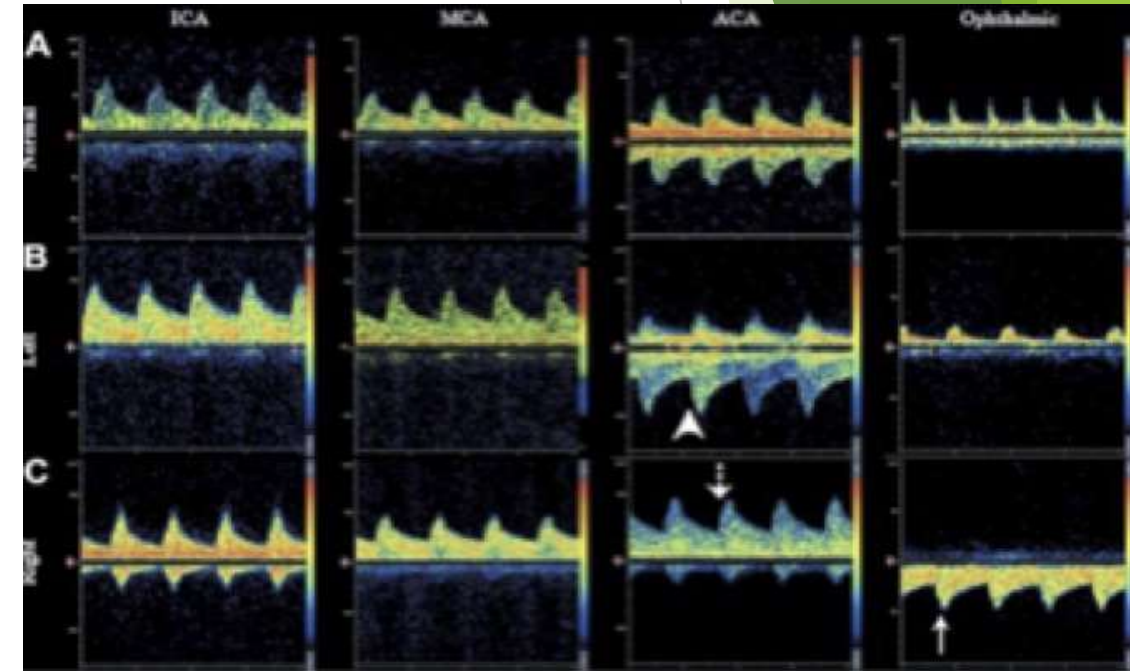
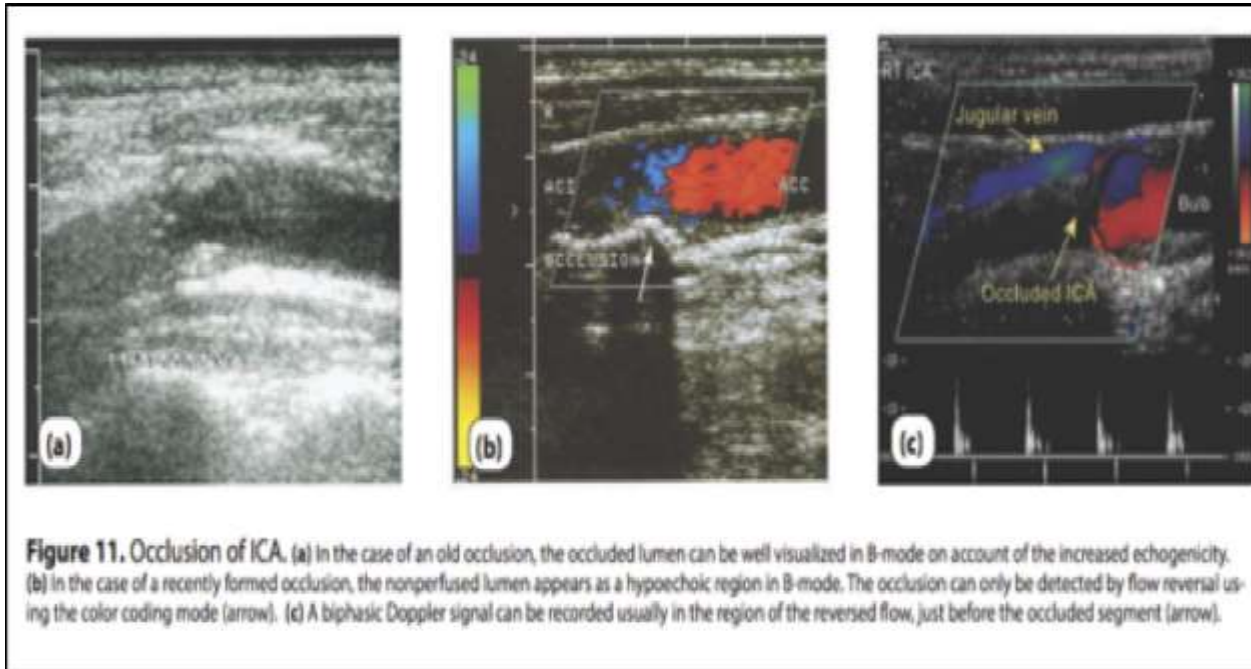
a. basilare

a. carotide interna

a. vertebrale



➤ ECO-DOPPLER DEI TRONCHI SOVRAORTICI (TSA)



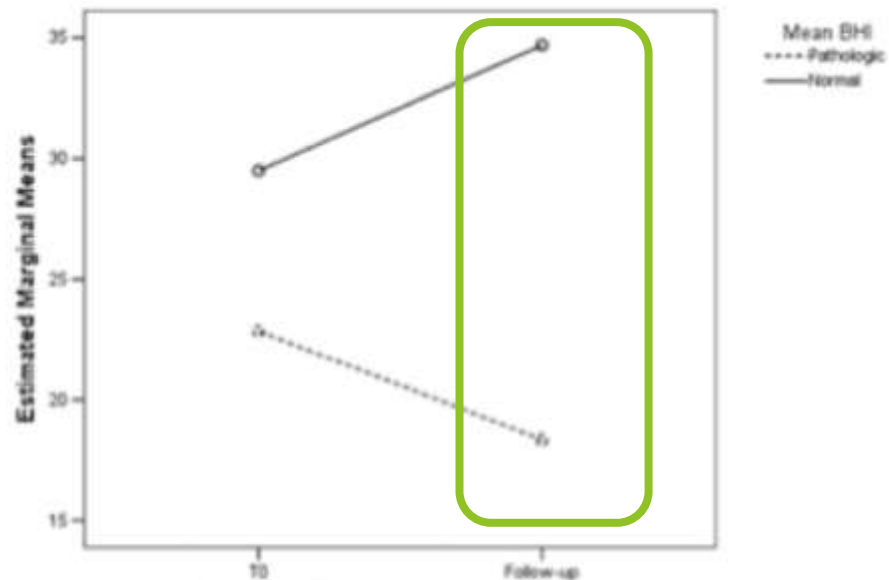
➤ DOPPLER TRANSCRANICO (TCD)

Risultati

dx

SX

Estimated Marginal Means of CPM

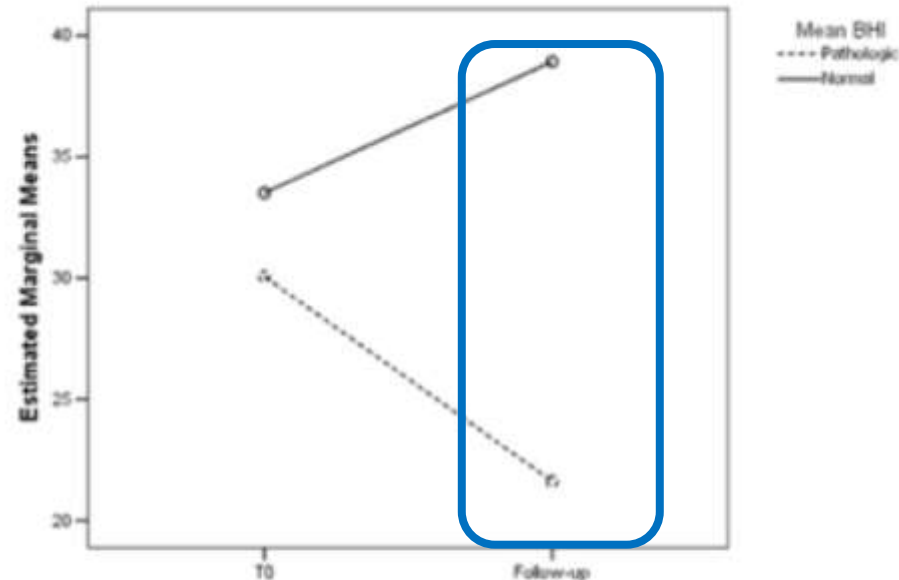


Coloured Progressive Matrices test

$P < 0.002$

MEAN BHI	TIME	MEAN	SE	95% CONFIDENCE INTERVAL	
				Lower	Upper
PATHOLOGIC	Baseline	2.504	0.36	1.689	3.319
	Follow-up	1.678	0.221	1.179	2.177
NORMAL	Baseline	4.487	0.736	2.823	6.151
	Follow-up	4.847	0.451	3.828	5.867

Estimated Marginal Means of Fluence Category Test

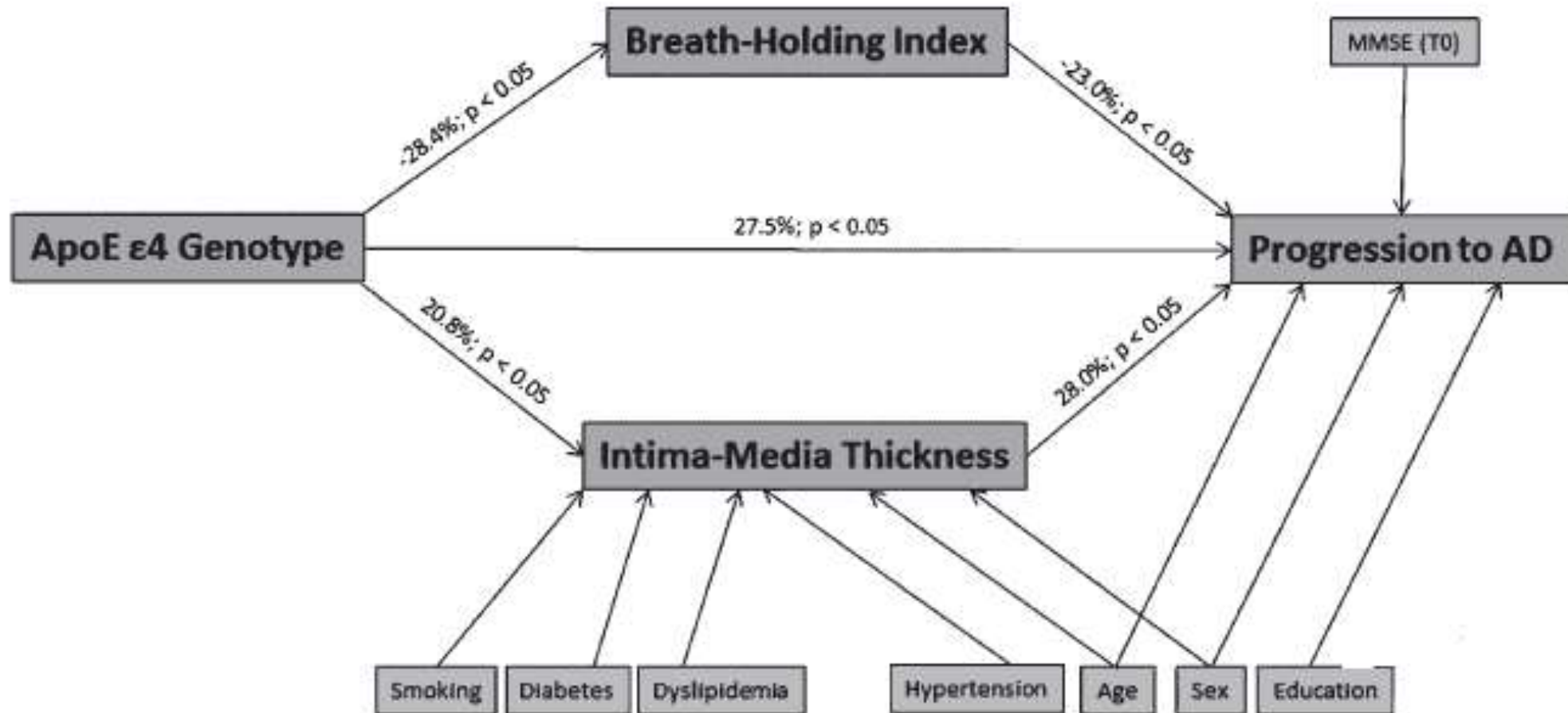


Fluence Category Test

$P < 0.004$

MEAN BHI	TIME	MEAN	SE	95% CONFIDENCE INTERVAL	
				Lower	Upper
PATHOLOGIC	Baseline	30.063	3.75	21.197	38.93
	Follow-up	21.625	2.334	16.107	27.143
NORMAL	Baseline	33.511	4.511	22.845	44.178
	Follow-up	38.925	2.807	32.287	45.563

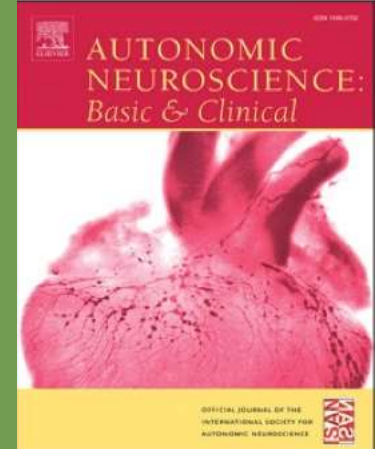
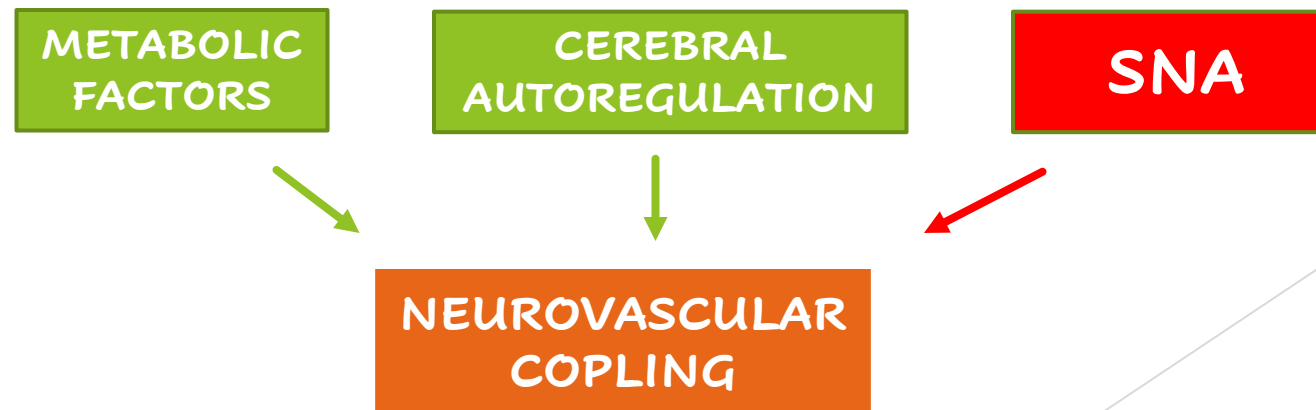
MULTIFACTORIAL GENESIS

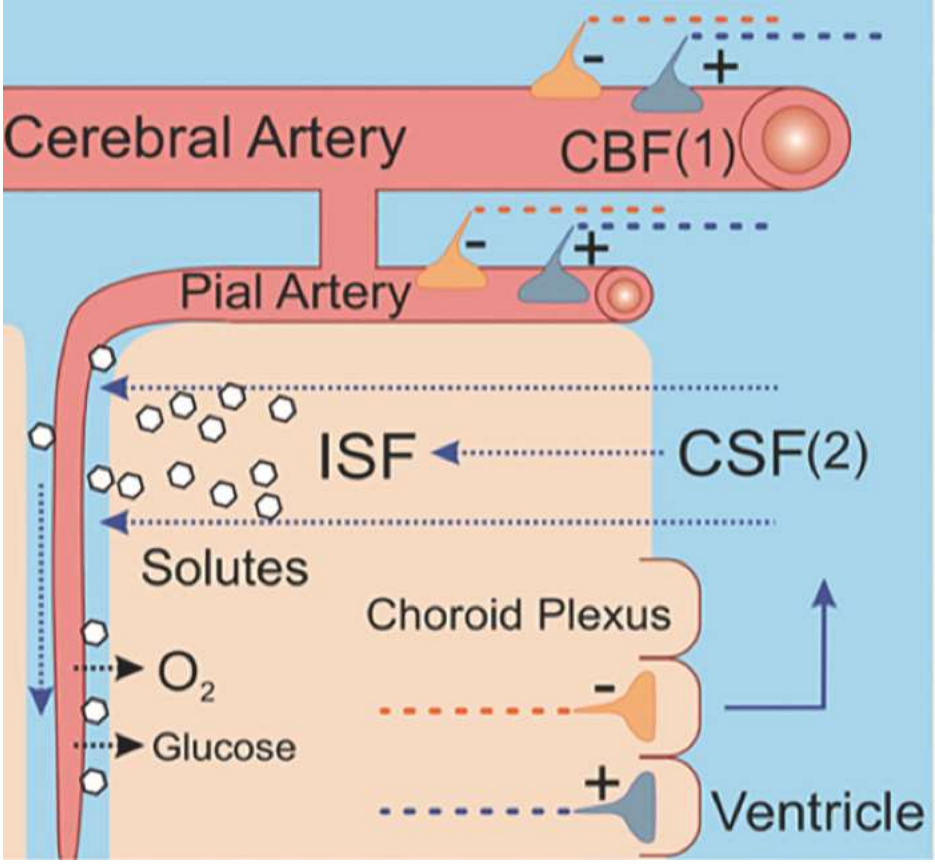


The role of the autonomic nervous system in cerebral blood flow regulation in dementia: A review

ABSTRACT

In this review we will examine the role of the autonomic nervous system in the control of cerebral blood flow (CBF) in dementia. Worldwide, 55 million people currently live with dementia, and this figure will increase as the global population ages. Understanding the changes in vascular physiology in dementia could pave the way for novel therapeutic approaches. Reductions in CBF have been demonstrated in multiple dementia sub-types, in addition to increased cerebrovascular resistance and reduced vasoreactivity. Cerebral autoregulation (CA) is a key mechanism for the maintenance of cerebral perfusion, but remains largely intact in cognitive disorders, despite reductions in global and regional CBF. However, the tight coupling between neuronal activity and CBF (neurovascular coupling - NVC) is lost in dementia, which may be a key driver of cognitive dysfunction. Despite numerous studies investigating disturbances in the control of CBF in dementia, less is known about the specific mechanisms responsible for the observed changes. Disturbances could be related to one of a number of pathways and mechanisms including disruption of the autonomic component. In this review we will explore clinical and animal studies, which specifically investigated the autonomic component of CBF control in dementia, drawing on the clinical implications and potential for novel biomarker and therapeutic targets.





Autonomic innervation

←--- Sympathetic

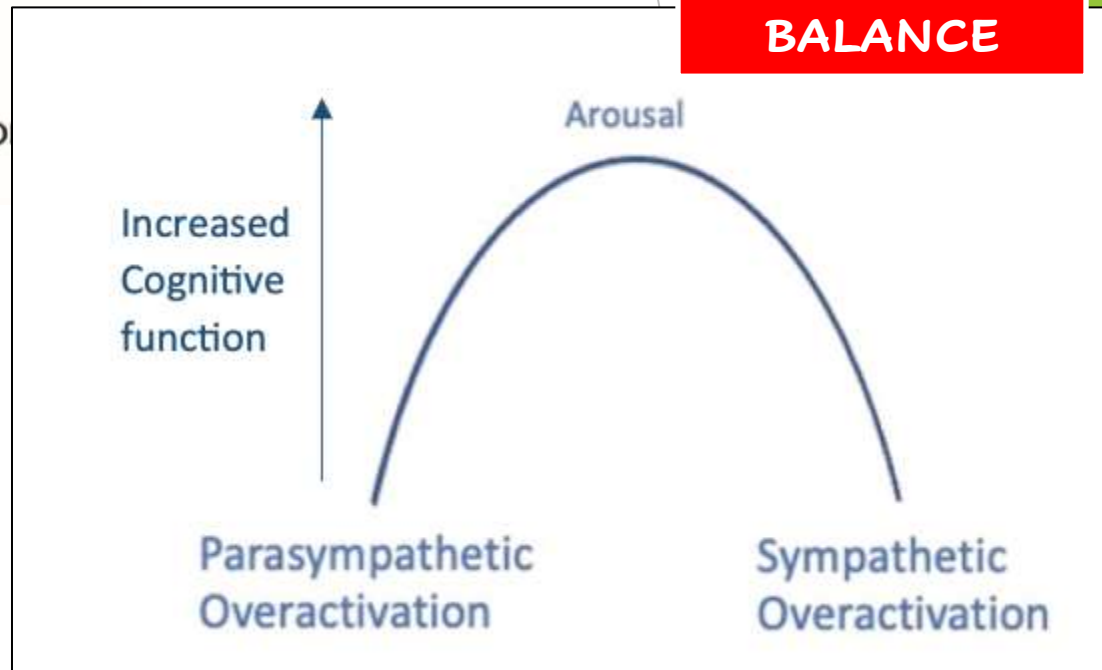
- ⊕ Aging
- ⊕ Cardiovascular disease
- ⊕ Diabetes

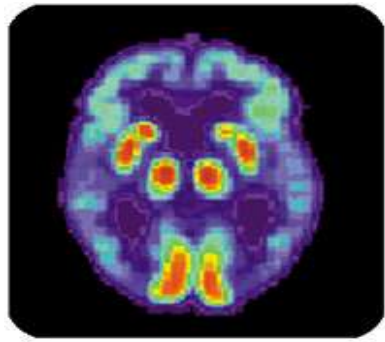
←--- Parasympathetic

- ⊖ Aging
- ⊖ Cardiovascular disease
- ⊖ Diabetes

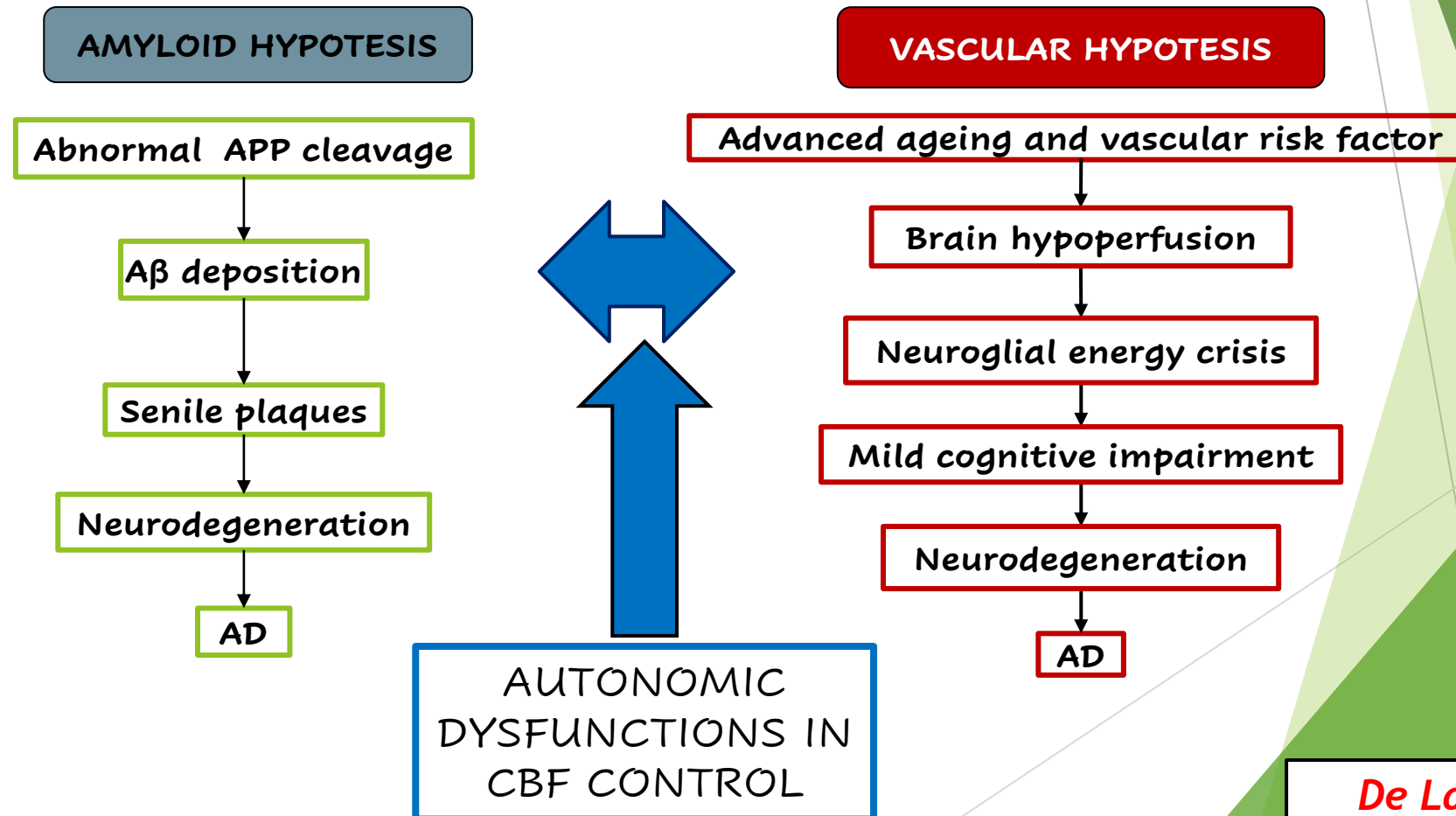
- ⊕ **Exercise**
- ⊕ Vagus Nerve Stimulation

AUTONOMIC BALANCE





ALZHEIMER'S DISEASE





**GRAZIE
PER
L'ATTENZIONE!**