



The 19th World Congress on CONTROVERSIES IN NEUROLOGY

20-22.3.2025 ▶ Prague, Czech Republic



AD & DEMENTIA SESSION

08:00-09:40 Alzheimer's Disease (AD) & Dementia		HALL B
Chairs:	Marina Janelidze , Georgia; Judith Aharon Peretz , Israel	
08:00-08:50	Alzheimer's Association debate: Individuals with atypical AD should be included in clinical trials	
	<i>Capsule: AD is typically perceived as a memory-predominant neurodegenerative condition. However, in ~10% of individuals non-amnesic features such as disturbances in processing of visual information, language impairment and/or behavioral/personality changes represent the core cognitive complaint. Due to their atypical clinical presentation (and associated biomarker profiles and progression rates), these individuals do not meet eligibility criteria for clinical trials and are therefore systematically excluded from promising investigational interventions with disease modifying drugs. Here, we will discuss the pros and cons of including individuals with atypical forms of AD in clinical trials.</i>	
08:00-08:10	Moderator: Rik Ossenkoppele , The Netherlands Introduction and Pre-Debate Voting	
08:10-08:25	Yes: Keir Yong , UK	
08:25-08:40	No: Rosaleena Mohanty , Sweden	
08:40-08:50	Discussion, Rebuttals and Post-Debate Voting	
08:50-09:40	Are the new anti-amyloid drugs cost-effective?	
	<i>Capsule: The cost-effectiveness of lecanemab and donanemab is being closely examined. Regulators and payors in the US, Europe, Great Britain and other jurisdictions have come to different conclusions. The usual price-point of \$100,000/QALY has been exceeded for lecanemab, and details for donanemab are not yet available. The advent of subcutaneous formulations and stopping/maintenance rules will have to be taken into account. Competition between current manufacturers, next generation antibodies and increased efficacy with longer term administration (3-5 years) at earlier stages of AD will also change the calculations</i>	
08:50-09:00	Moderator: Colin L. Masters , Australia Introduction and Pre-Debate Voting	
09:00-09:15	Yes: Jakub Hlavka , Czech Republic	
09:15-09:30	No: Stanislav Sutovsky , Slovakia	
09:30-09:40	Discussion, Rebuttals and Post-Debate Voting	



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14:10-15:50	Alzheimer's Disease (AD) & Dementia (continued)	HALL B
Chairs:	Odelia Elkana , Israel; Xiao Ping Wang , China	
14:10-15:00	Should MCI patients be immunized against zoster?	
	Capsule: Retrospective studies have suggested that immunization against herpes zoster reduces the incidence of dementia. Can this also be of therapeutic value, i.e. should AD patients be immunized to ameliorate the disease?	
14:10-14:20	Moderator: Stanislav Sutovsky , Slovakia Introduction and Pre-Debate Voting	
14:20-14:35	Yes: Lukasz Rzepiński , Poland	
14:35-14:50	No: Dorota Religa , Sweden	
14:50-15:00	Discussion, Rebuttals and Post-Debate Voting	
15:00-15:50	Is AD a disease?	
	Capsule: The definition of AD has changed several times over the years and still lacks an agreed one. Lacking understanding of the causes and mechanisms of the condition, it is still arguable whether it should be considered a disease or a syndrome	
15:00-15:10	Moderator: Lon Schneider , USA Introduction and Pre-Debate Voting	
15:10-15:25	Yes: Colin L. Masters , Australia	
15:25-15:40	No: Amos Korczyn , Israel	
15:40-15:50	Discussion, Rebuttals and Post-Debate Voting	



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16:20-18:00	Alzheimer's Disease (AD) & Dementia (continued)	HALL B
Chairs:	Yvonne Freund-Levi , Sweden; Milica G. Kramberger , Slovenia	
16:20-17:10	Monoclonal antibodies or natural products for prevention of dementia?	
	<i>Capsule: Monoclonal antibodies and natural products are both being explored for the prevention of dementia. Monoclonal antibodies target, for example, amyloid plaques in the brain, which are a hallmark of AD, and have been shown consistently to have positive effects on reducing amyloid levels and slowing cognitive decline. However, their high cost and potential side effects are concerns. On the other hand, natural products like dietary supplements, omega-3 fatty acids, and antioxidants may support brain health and delay cognitive decline. Both approaches have potential, but further studies are essential to determine their long-term benefits and practicality</i>	
16:20-16:30	Moderator: Robert Perneczky , Germany Introduction and Pre-Debate Voting	
16:30-16:45	Natural products: Magda Tsolaki , Greece	
16:45-17:00	Monoclonal antibodies: Jakub Hort , Czech Republic	
17:00-17:10	Discussion, Rebuttals and Post-Debate Voting	
17:10-18:00	Do lifestyle factors protect against dementia by affecting amyloid metabolism?	
	<i>Capsule: Lifestyle factors, such as physical activity, diet, and cognitive engagement, may protect against dementia by influencing amyloid metabolism. Exercise is associated with reduced amyloid plaque accumulation and improved cognitive function. Diets like the Mediterranean diet link to lower amyloid levels and slower cognitive decline. Cognitive engagement through activities like reading and puzzles can delay dementia onset by reducing amyloid pathology. However, genetic predispositions and the complex nature of lifestyle adherence can limit these benefits. While promising, the relationship between lifestyle factors and amyloid metabolism is not fully understood, and this debate will discuss the pros and cons of the existing evidence.</i>	
17:10-17:20	Moderator: Robert Perneczky , Germany Introduction and Pre-Debate Voting	
17:20-17:35	Yes: Laura Bonanni , Italy	
17:35-17:50	No: Giancarlo Logroscino , Italy	
17:50-18:00	Discussion, Rebuttals and Post-Debate Voting	