



Alzheimer's Disease



OBJECTIVES:

- Have an overview of neurodegenerative disorders
- Understand the role of amyloid beta 40-42 residue peptide in Alzheimer's disease
- Get an idea of the diagnosis and therapeutic approaches to treat these disorders



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Introduction

Diseases of gray matter characterized principally by the progressive loss of neurons

The pattern of neuronal loss is selective affecting one or more groups of neurons leaving the others intact

The diseases arise without any clear inciting event in patients without previous neurological deficits

A common theme is the development of protein aggregates that are resistant to normal cellular mechanisms of degradation

The aggregated proteins are generally cytotoxic

A degenerative disease with the prominent involvement of the cerebral cortex.

Its principal clinical manifestation is dementia which is the progressive loss of cognitive function independent of the state of attention

Patients rarely become symptomatic before 50 yr. of age but the incidence of disease rises with age

In 5-10 yrs, the patient becomes profoundly disabled, mute and immobile

Most cases are sporadic.

At least 5-10% are familial

Diagnosis

<http://www.youtube.com/watch?v=dj3GGDuu15I>

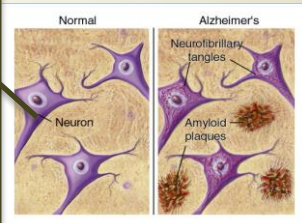
- Combination of **clinical assessment + radiologic methods**
- **Pathologic examination** of brain tissue is necessary for definitive diagnosis
- Major microscopic abnormalities include: **neuritic plaques, neurofibrillary tangles and amyloid angiopathy**

neuritic plaques

- **Spherical** with 20-200 μm in diameter
- Contain **paired helical filaments** as well as synaptic vesicles and abnormal mitochondria
- The **amyloid core** contains several abnormal proteins
- The dominant component of the plaque core is **A β** , a peptide derived from a larger molecule, **amyloid precursor protein (APP)** (will be discussed later)
- The two dominant species of A β , called **A β_{40}** and **A β_{42}** share an **N-terminus** and differ in length by two amino acids.
- Other less abundant proteins in the plaque:
 - Components of the **complement** cascade
 - **Proinflammatory cytokines**
 - **α 1-Antichymotrypsin**
 - **Apolipoproteins**

Neurofibrillary Tangles

- Bundles of **filaments** in the cytoplasm of neurons that displace or encircle the nucleus
- These filaments mainly contain:
 - **Hyperphosphorylated** forms of the **TAU PROTEIN**
 - A protein that enhances microtubule assembly



Amyloid Angiopathy

Amyloid proteins build up on the walls of the arteries in the brain

- The condition **increases** the risk of **hemorrhagic, stroke and dementia**
- An almost invariable accompaniment of Alzheimer's disease but not specific for Alzheimer's

Pathogenesis

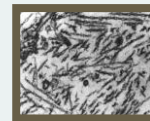
- Still being intensively studied
- Strong correlation of number of neurofibrillar tangles with degree of dementia than neuritic plaques
- Biochemical markers correlated to degree of dementia include:
 - Loss of choline acetyl transferase
 - Synaptophysin immunoreactivity
 - Amyloid burden
- Loss of synapses best correlates with severity of dementia
- The A β peptide forms β -pleated sheets and aggregates
- Resistant to degradation
- Elicits a response from astrocytes and microglia
- Can be directly neurotoxic
- Accumulation of A β protein affects neurons and neuronal function:
 - Small aggregates of A β alters neurotransmission
 - Aggregates can be toxic to neurons and synaptic endings
 - Larger deposits (plaques) also cause neuronal death
 - Elicit a local inflammatory response leading to further cell injury

A β Peptides

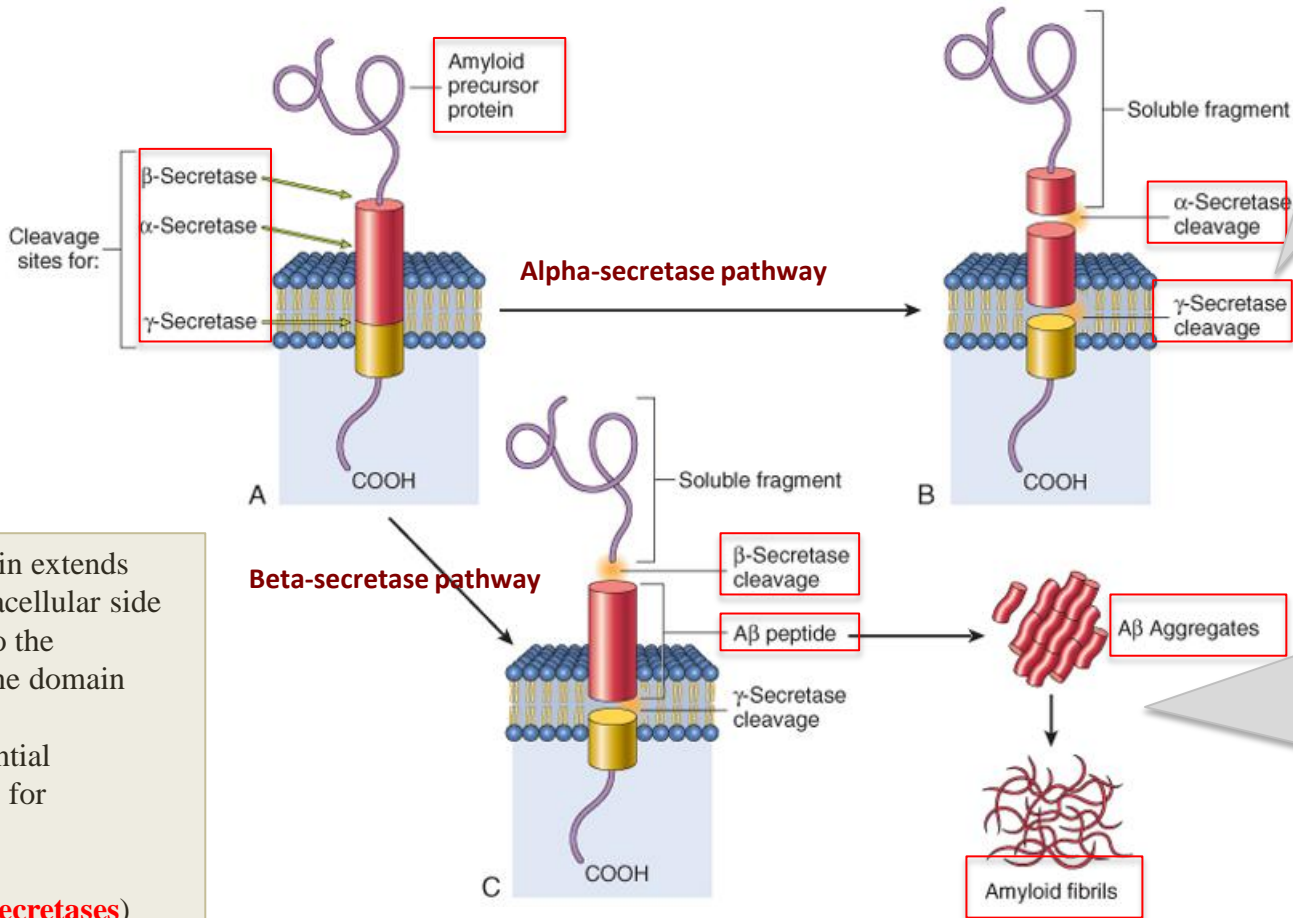
- Derived from the processing of APP
- APP is a protein of uncertain cellular function
- It is synthesized with a single transmembrane domain and expressed on the cell surface
- A β is a critical molecule in the pathogenesis of Alzheimer's disease

The Tau Protein

- Presence of A β causes hyperphosphorylation of tau protein in neurons
- This leads to redistribution and aggregation of tau protein into tangles in neurons (from axon into dendrites and cell body)
- The process results in neuronal dysfunction and cell death



Two pathways for APP processing



The $A\beta$ domain extends from the extracellular side of protein into the transmembrane domain

APP has potential cleavage sites for three distinct enzymes :

(α , β , and γ -secretases)

When APP is cleaved by α secretase, Subsequent cleavage by γ secretase does not yield $A\beta$ (normal)

Mechanism of amyloid generation

Cleavage by β -secretase followed by γ -secretase results in production of $A\beta$
 $\Rightarrow A\beta$ can then aggregate and form fibrils

Treatment

- Currently, no effective treatment for AD
- regulating neurotransmitter activity e.g., Enhancing cholinergic function improves AD
- Epidemiological studies showed that treatment with NSAIDs decreases the risk for developing AD.
Unfortunately, clinical trials of NSAIDs in AD patients have not been very fruitful.
- Proinflammatory responses may be countered through polyphenols (flavonoids). Supplementation of these natural compounds may provide a new therapeutic line of approach to this brain disorder.
- Cellular therapies using stem cells offer great promise for the treatment of AD and they offer:
 - Cellular replacement and/or provide environmental enrichment to attenuate neurodegeneration.
 - Neurotrophic support to remaining cells or prevent the production or accumulation of toxic factors that harm neurons.

Genetics

- Mutations in APP gene
- Mutations in γ -secretase (presenilin-1 or presenilin-2)
- Both lead to early onset of familial Alzheimer's disease due to high rate of $A\beta$ accumulation
- Alzheimer's occurs in most patients with Down's syndrome (trisomy 21) beyond 45 years of age
- The gene encoding APP is located in chromosome 21
- Due to APP gene dosage effects
- Genes associated with typical, sporadic Alzheimer's disease are being identified
- This may provide new clues to pathogenesis of the disease

Chromosome	Gene	Consequences
21	Amyloid Precursor Protein (APP)	Early onset FAD Increased $A\beta$ production
14	Presenilin-1 (PS1)	Early onset FAD Increased $A\beta$ production
1	Presenilin-2 (PS2)	Early onset FAD Increased $A\beta$ production
19	Apolipoprotein E (ApoE)	Increased risk for development of AD Decreased age at onset of AD

Research question :

- The small aggregates of A β and larger fibrils are directly neurotoxic
- They can elicit oxidative damage and alterations in calcium homeostasis
- How A β is correlated to neurodegeneration in AD? How it is linked to tangles and hyperphosphorylation of tau protein?
- All remain open questions

1) The progression of dementia in Alzheimer's disease is strongly correlated with ?

- A- Amyloid angiopathy**
- B- Neurofibrillary tangles.**
- C- Neuritic plaques.**
- D- Number of plaques.**

2) Degradation of APP by which ONE of the following causes steps produce A β :

- A- Cleavage by β -secretase followed by γ -secretase.**
- B- Cleavage by α -secretase followed by γ -secretase.**
- C- Cleavage by β -secretase followed by α -secretase.**
- D- Cleavage by β -secretase only.**

3) Alzheimer's disease become apparent with:

- A- Alterations in mood and behavior**
- B- Progressive disorientation**
- C- Memory loss**
- D- All of them.**

4) A 65-years old male presented with dementia was suspected to have Alzheimer's, which of the following procedures is the best to confirm the diagnosis:

- A- Brain MRI**
- B- Brain biopsy**
- C- Angiogram.**
- D- None of them is suitable.**

5) which of the following statements is true regarding neuritic plaques ?

- A- It is composed of Tau-protein.**
- B- It causes symptoms.**
- C- It has a role in neurofibrillary tangles formation**
- D- It is build up in walls of arteries.**

6) Which ONE of the following is more likely to have Alzheimer's diseases beyond 45 years of age:

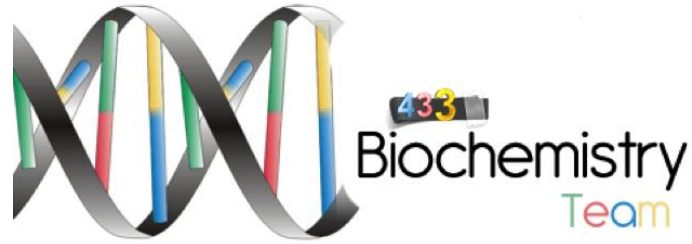
- A- Klinefelter syndrome**
- B- Down syndrome.**
- C- Color blindness**
- D- Edwards syndrome**

7) A Brain biopsy was done to an old man who has been suffering from dementia for a long time, the lesions are more likely to be seen at:

- A- The cerebral cortex**
- B- The cingulate gyrus**
- C- Corpus callosum**
- D- The insula.**

8) The common role of Tau-protein is to :

- A- Degradate Beta amyloid protein.**
- B- Phosphorylate other enzymes**
- C- Destruct the neural density .**
- D- Enhances microtubule assembly**



Thank You!

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