

RCCN Workshop:  
Measuring Biologic Age

Brain Aging: *The 90+ Study*

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*Nothing to Disclose*



# Aging

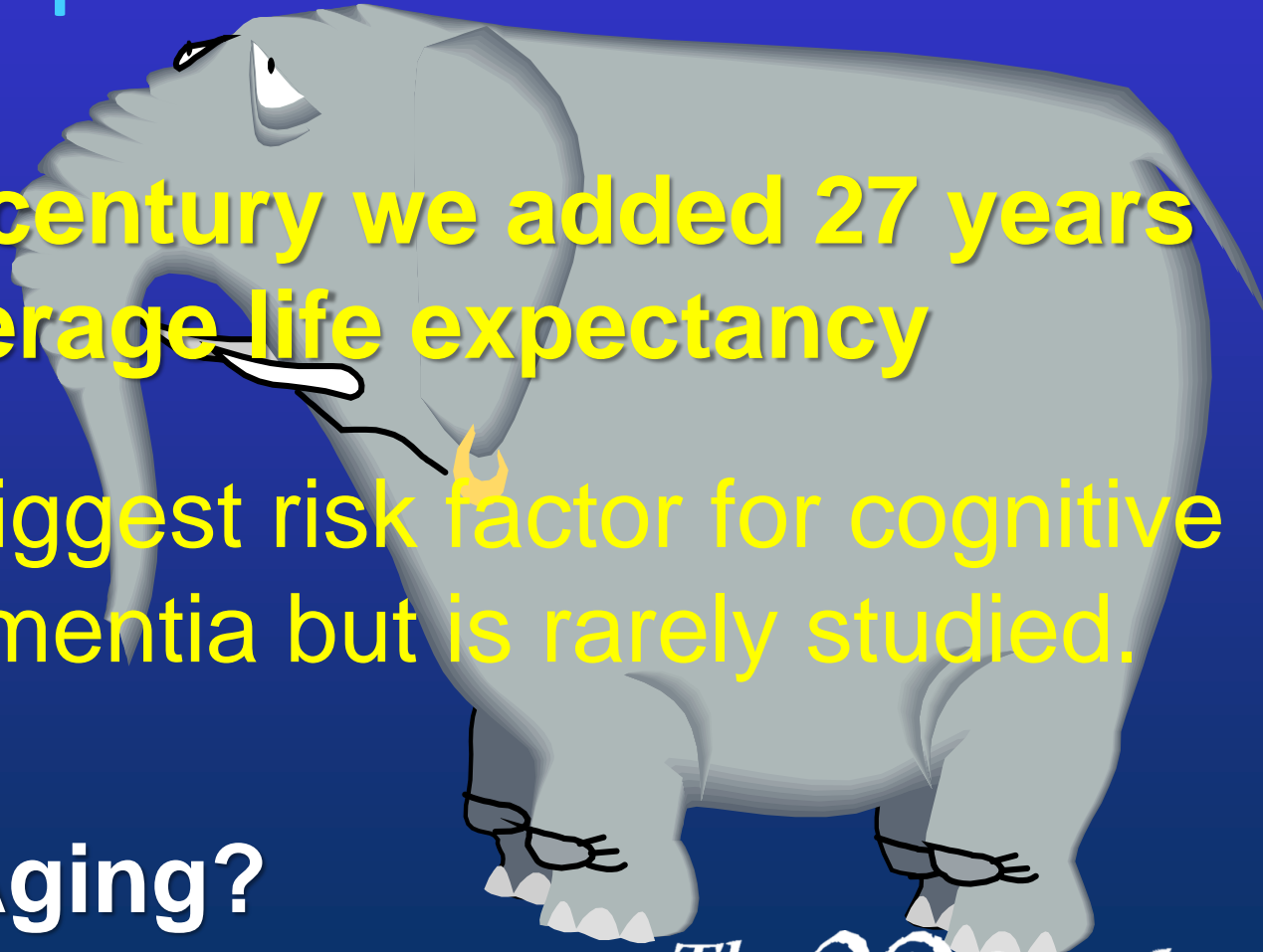
The Elephant in the Room!

In the past century we added 27 years to average life expectancy

Age is the biggest risk factor for cognitive loss and dementia but is rarely studied.

What is Aging?

*The 9+ Study*



*If increases in life expectancy continue,*

more than half of all children born today in developed countries can expect to celebrate their 100<sup>th</sup> birthdays

Christensen, Ageing Populations: The Challenges Ahead, *Lancet*, 2009

## Unknown in 90+ Year Olds

- Risk/Protective Factors Related to Longevity
- Prevalence and Incidence of Dementia, Disability and Frailty
- Risk/Protective Factors Related to Dementia
- Types of Dementia
- Excluded from diagnostic criteria for AD (McKhann, 1984)
- Excluded from most studies including ADNI, Clinical trials

*The 9+ Study*

# The 90+ Study

Population-based study of aging and dementia in persons aged 90 and older

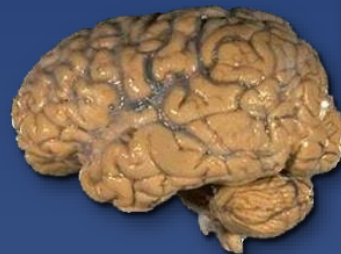
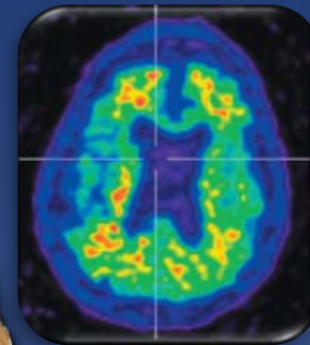


# Studies of Factors Associated with Longevity

- ~~Vitamin C (diet + supplements)~~
- ~~Vitamin A (diet + supplements)~~
- ~~Vitamin E (supplements)~~
- ~~Calcium (diet)~~
- ~~Soft drinks (cola & other)~~
- ~~Tea (black or green)~~
- Alcohol (wine, beer, other)
- Caffeine
- Body Mass Index
- Activities - Exercise and Leisure
- Positive Attitude

# 90+ Study Assessments

- Demographics & Medical History
- Neuropsychological Tests
  - Memory, language, executive function
- Neurological & Physical Examination
- Informant Questionnaires
- Genetic studies
  - DNA and cell lines
- Brain Imaging
- Brain Donation



# The 90+ Study Participants Baseline Results

# of Participants 1603

## Education

College grad or more 41%

## Marital Status

Widowed 77%

Married 14%

% of Women 76%

Mean Age 95.8

## Type of Residence

Nursing or group home 40%

Home alone 31%

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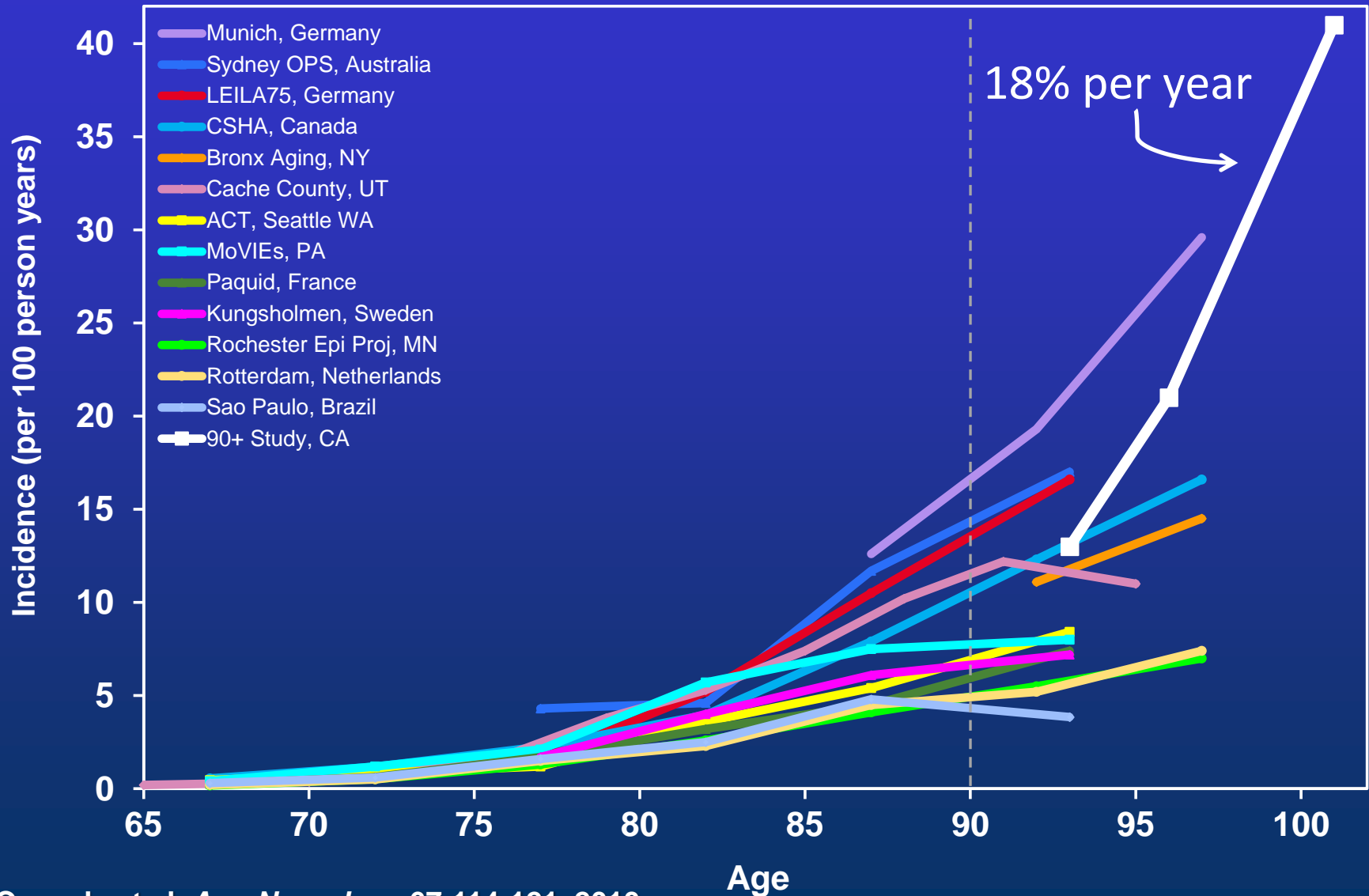
## Neurological Exam Cognitive Diagnosis

Normal 32%

Cognitively Impaired, No Dementia 34%

Dementia 34%

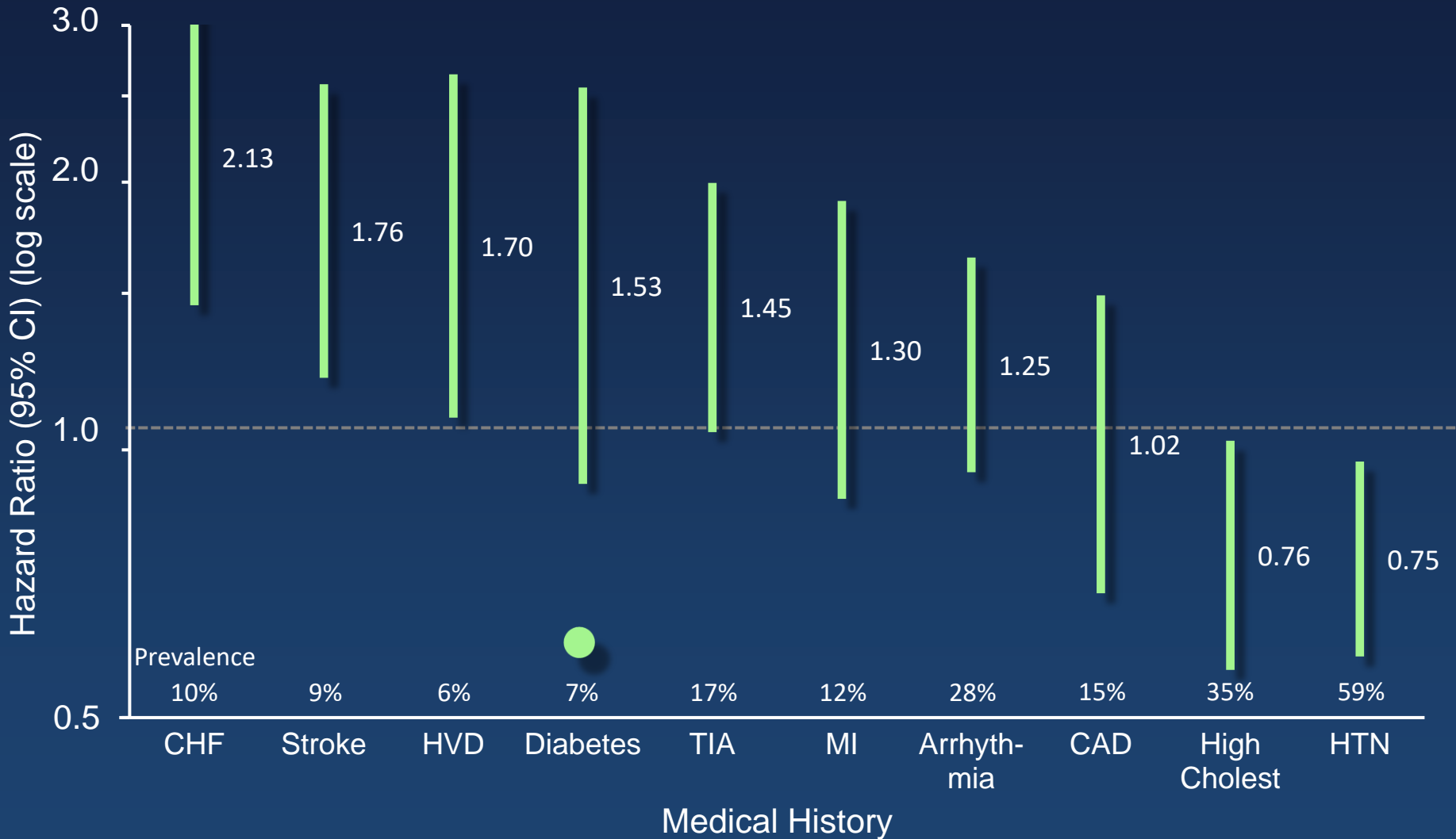
# Age-Specific Incidence of Dementia in Studies with Subjects Aged 90+



Many putative risk factors for dementia do not appear to be risk factors for dementia at this age

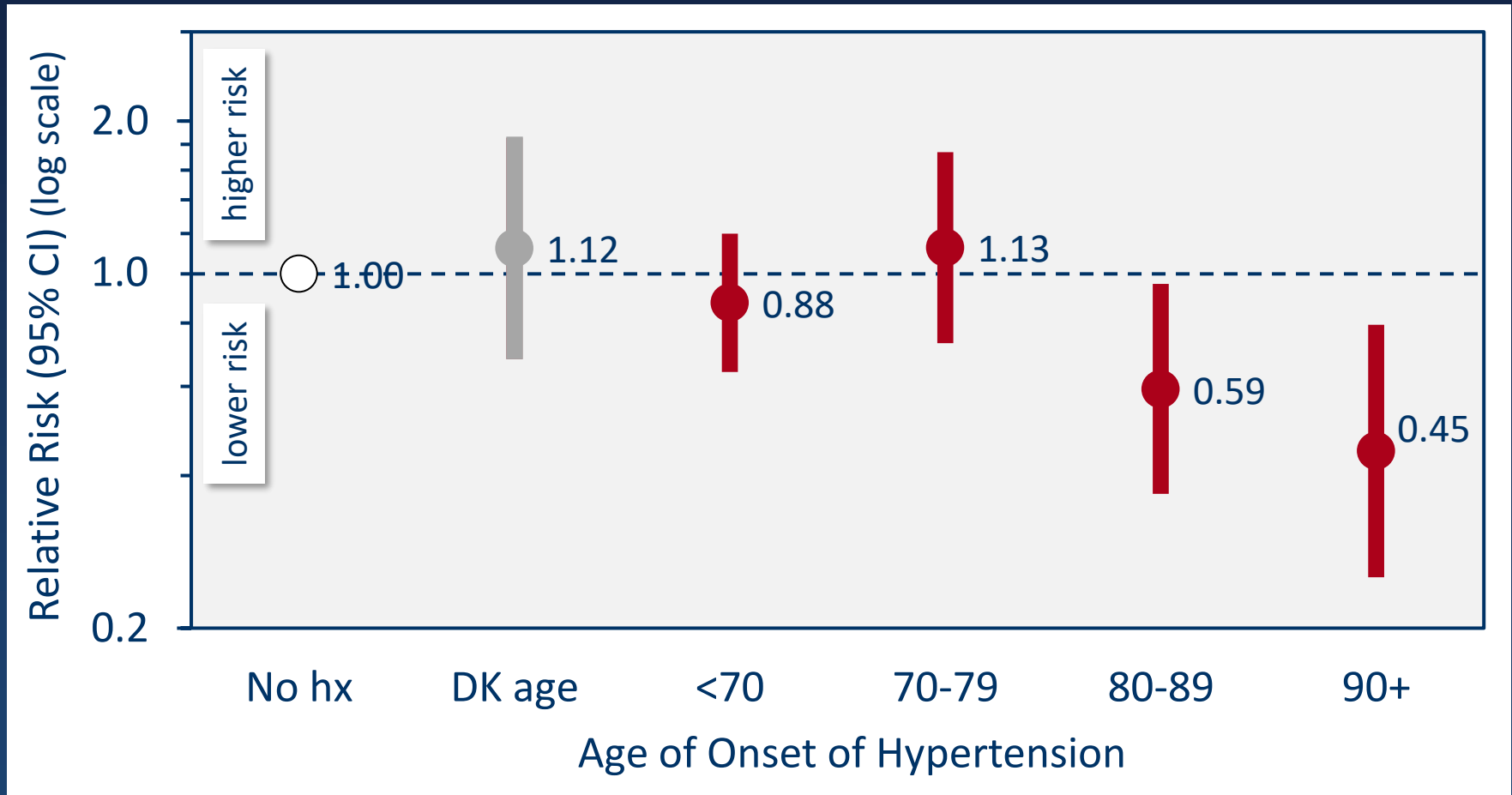
- ~~Vitamin E (supplementation)~~
- ~~Vitamin C (diet and supplementation)~~
- ~~BMI~~
- ~~Alcohol~~
- ~~Caffeine~~
- ~~Apolipoprotein E  $\epsilon$ 4~~
- ~~Homocysteine levels~~
- ~~Thyroid function~~
- Education and physical performance

# Cardio- and Cerebrovascular Disease & Risk of Dementia (N=625)



Cox regression adjusting for age, gender, & education

# Risk of Dementia in Relation to Age of Onset of Hypertension



What are the causes of dementia in  
90+ year olds?

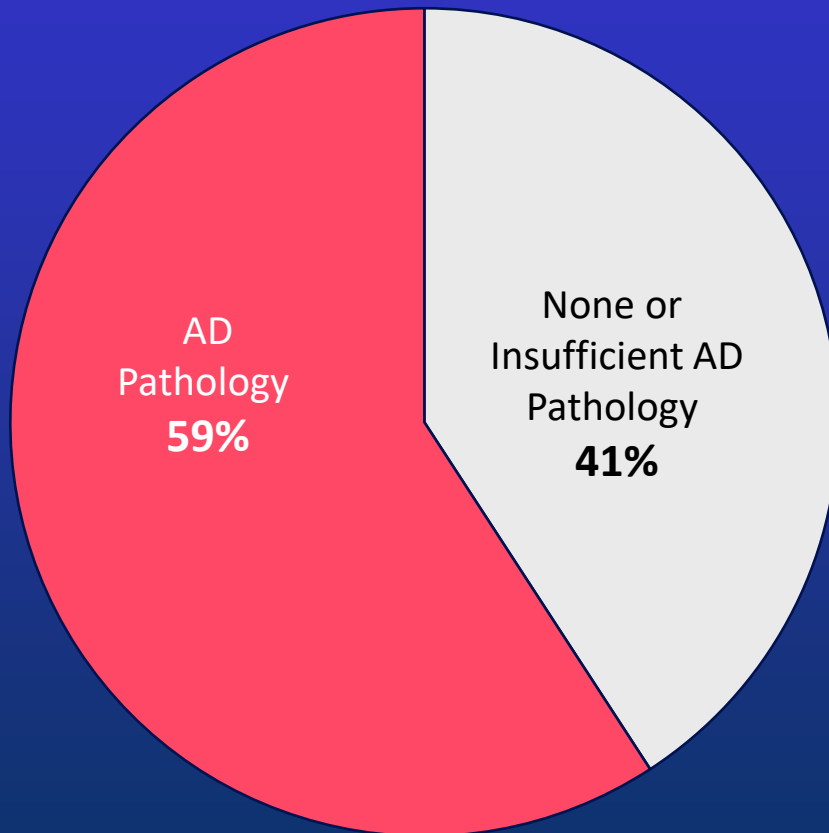
## *The 90+ Autopsy Study*



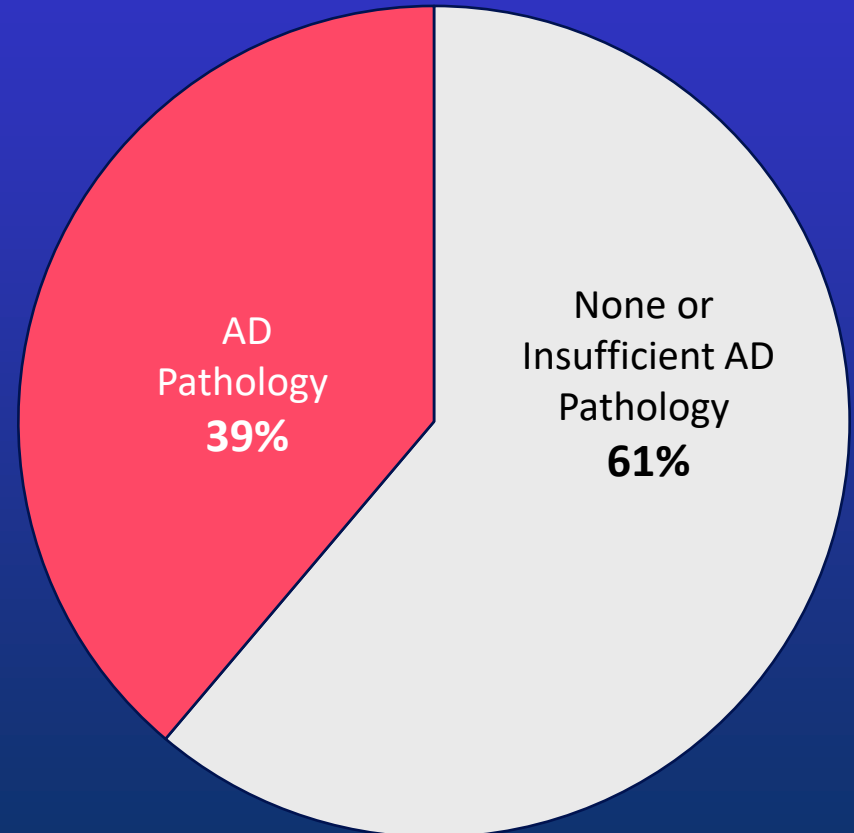
- 587 people enrolled
- 432 have come to autopsy

# Pathological Diagnoses by Dementia Status

**Dementia**  
(N=98)

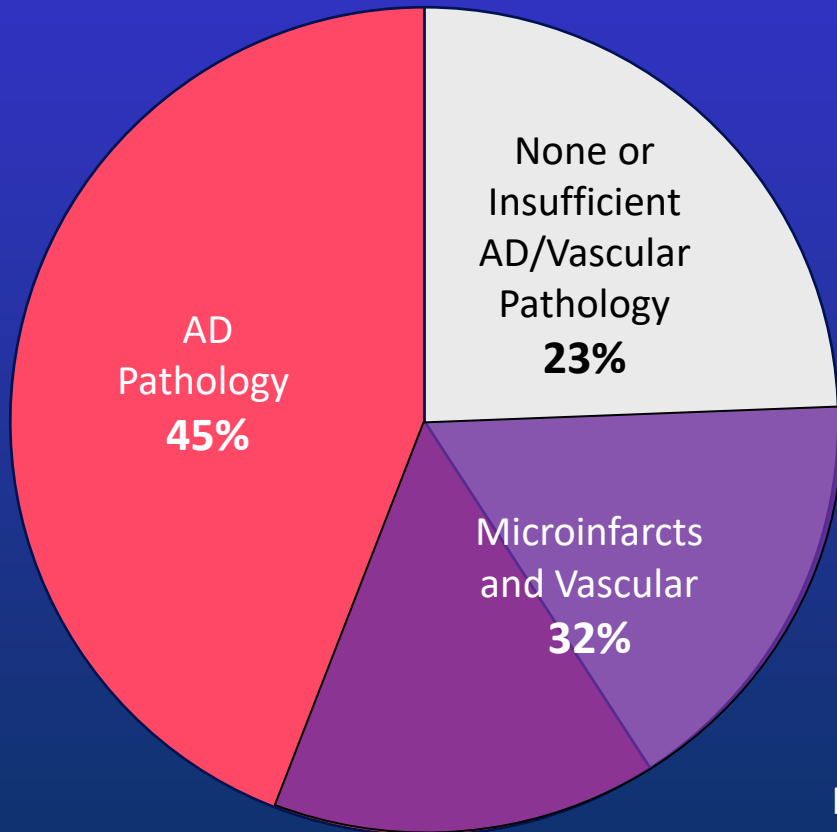


**No Dementia**  
(N=85)

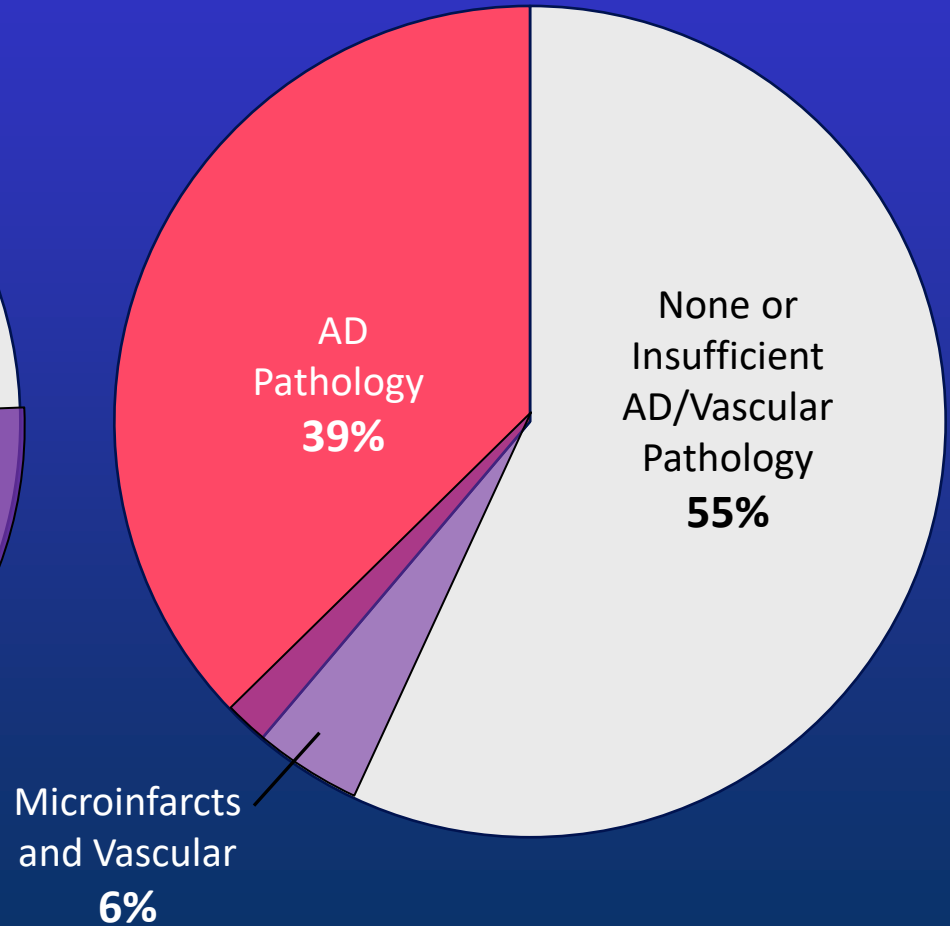


# Pathological Diagnoses by Dementia Status

**Dementia**  
(N=98)

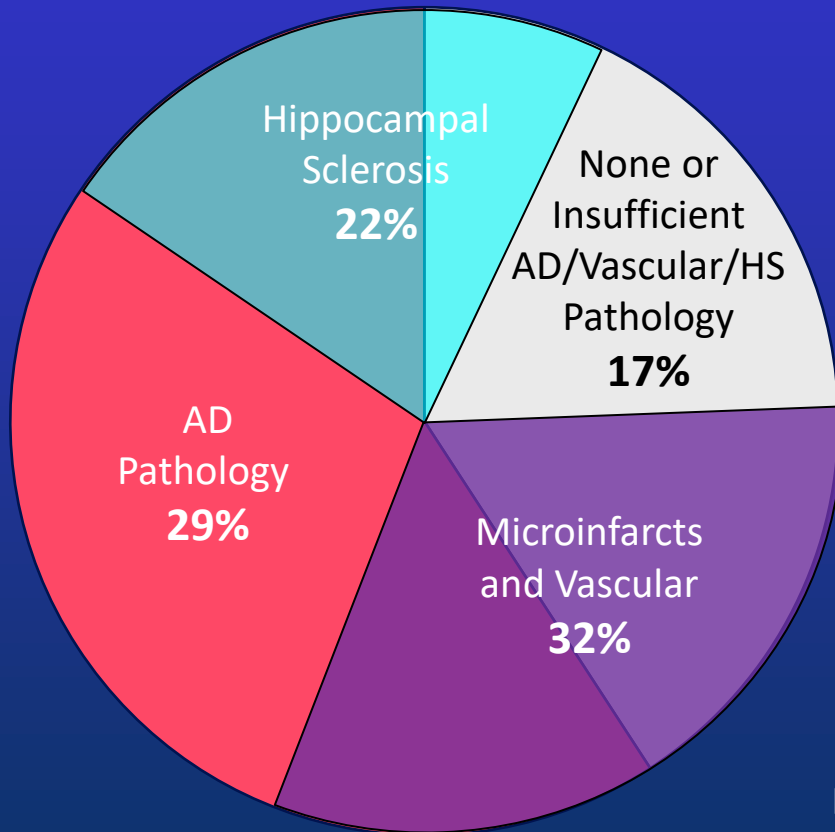


**No Dementia**  
(N=85)

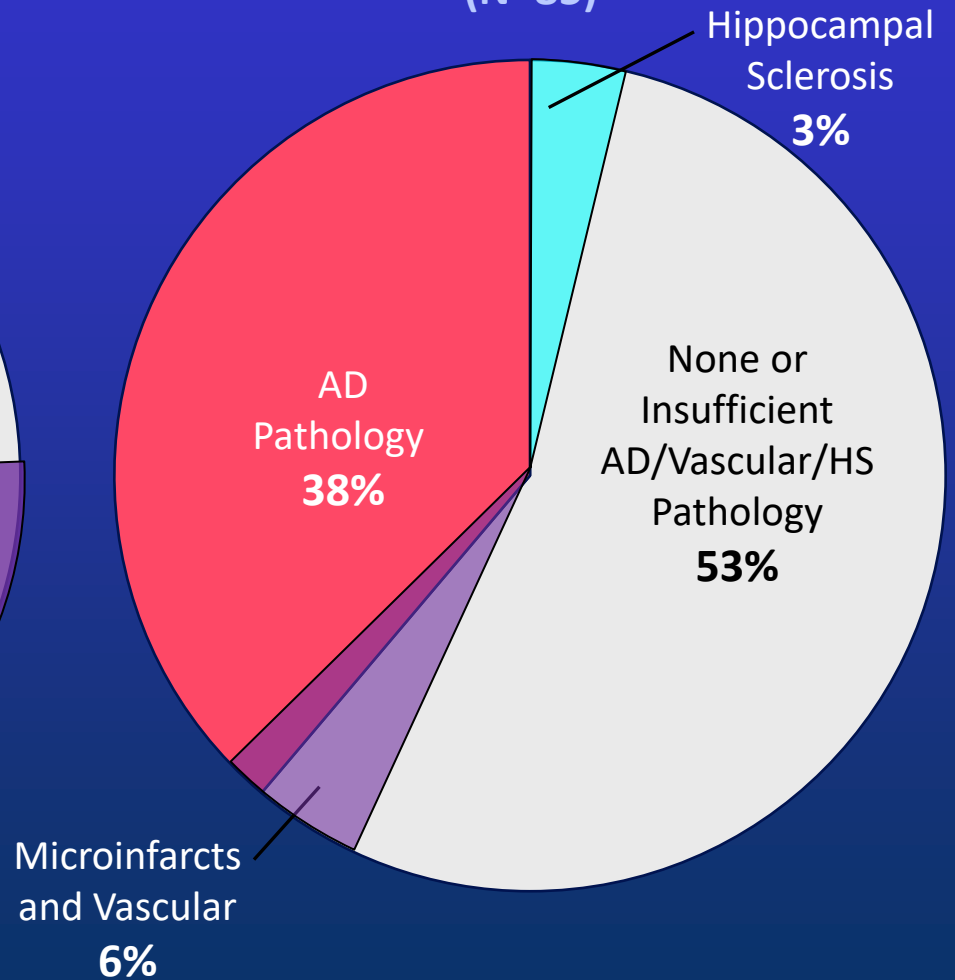


# Pathological Diagnoses by Dementia Status

**Dementia**  
(N=98)

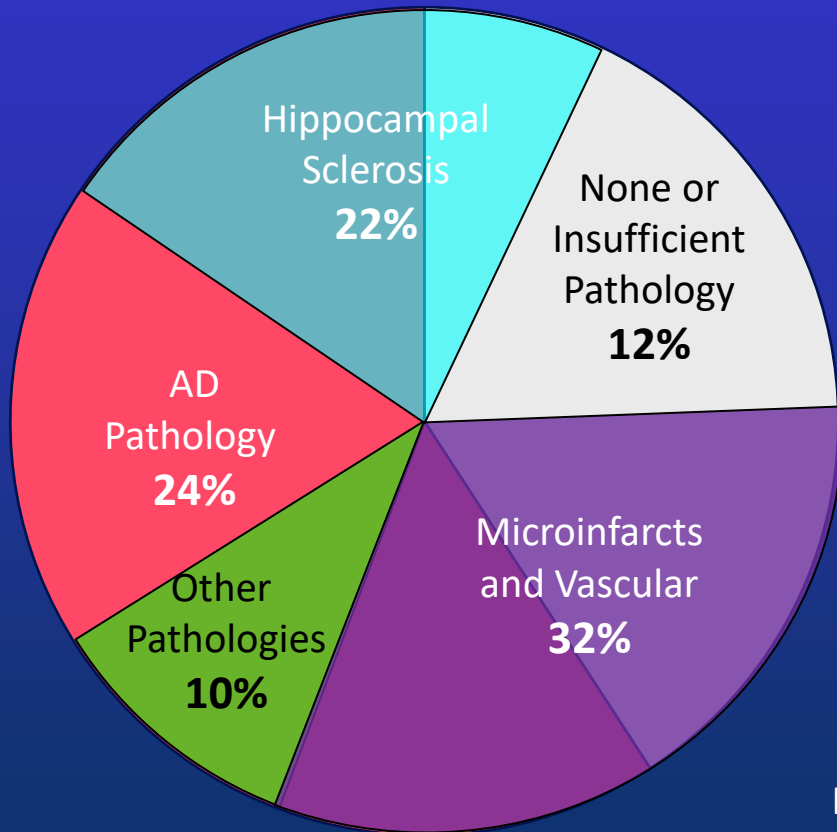


**No Dementia**  
(N=85)

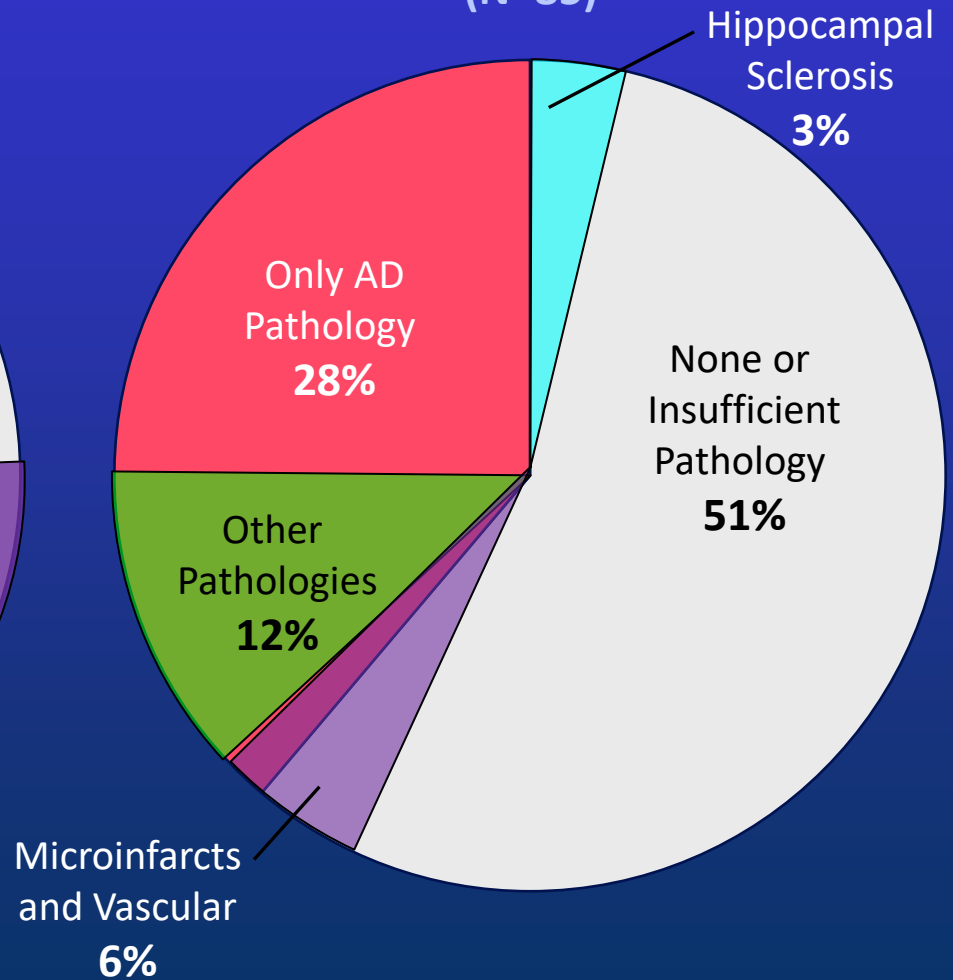


# Pathological Diagnoses by Dementia Status

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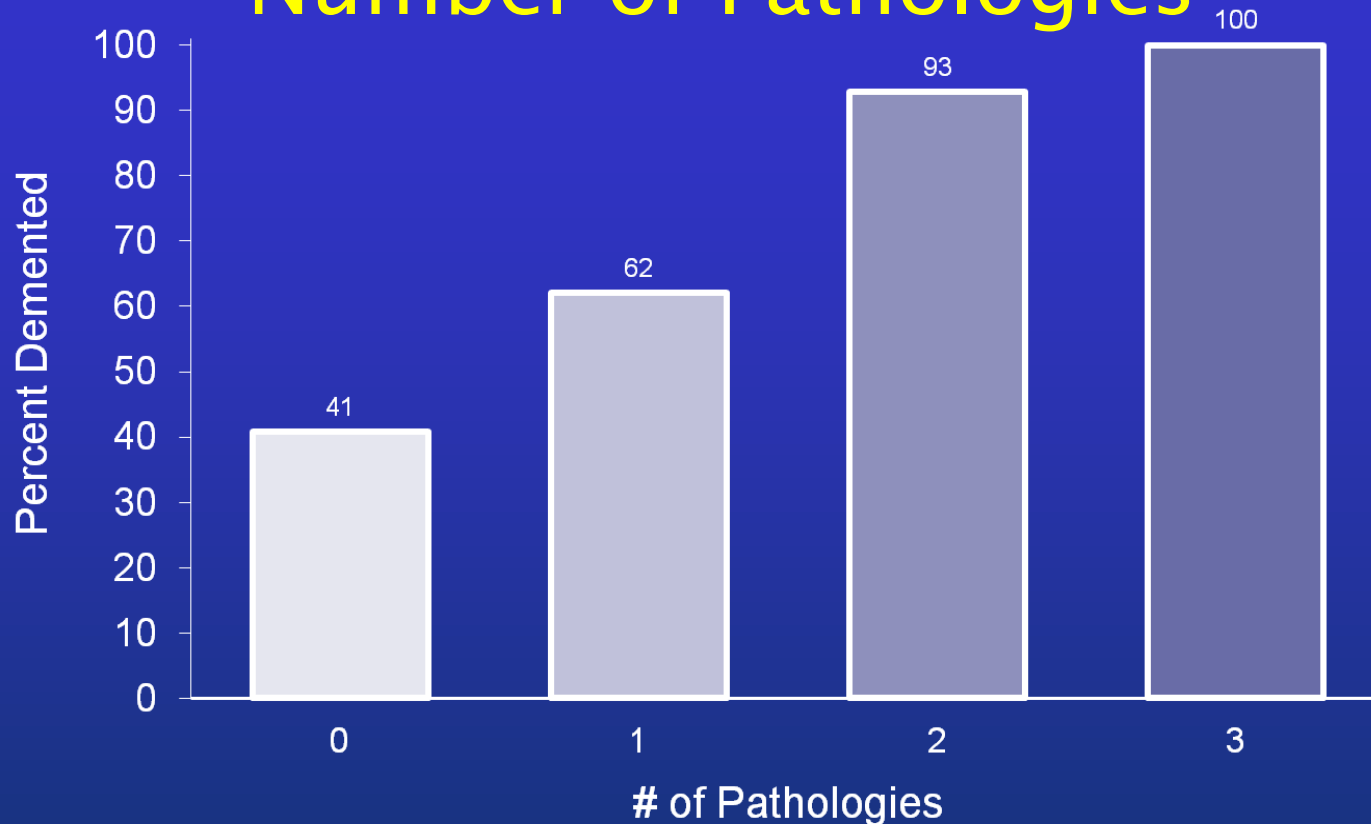


**No Dementia**  
(N=85)



AD=Intermediate/High NIA Reagan Criteria; Vascular = lacunes, large infarcts, WM gliosis ; Other = LBD, CAA, glioblastoma, cortical basal degeneration

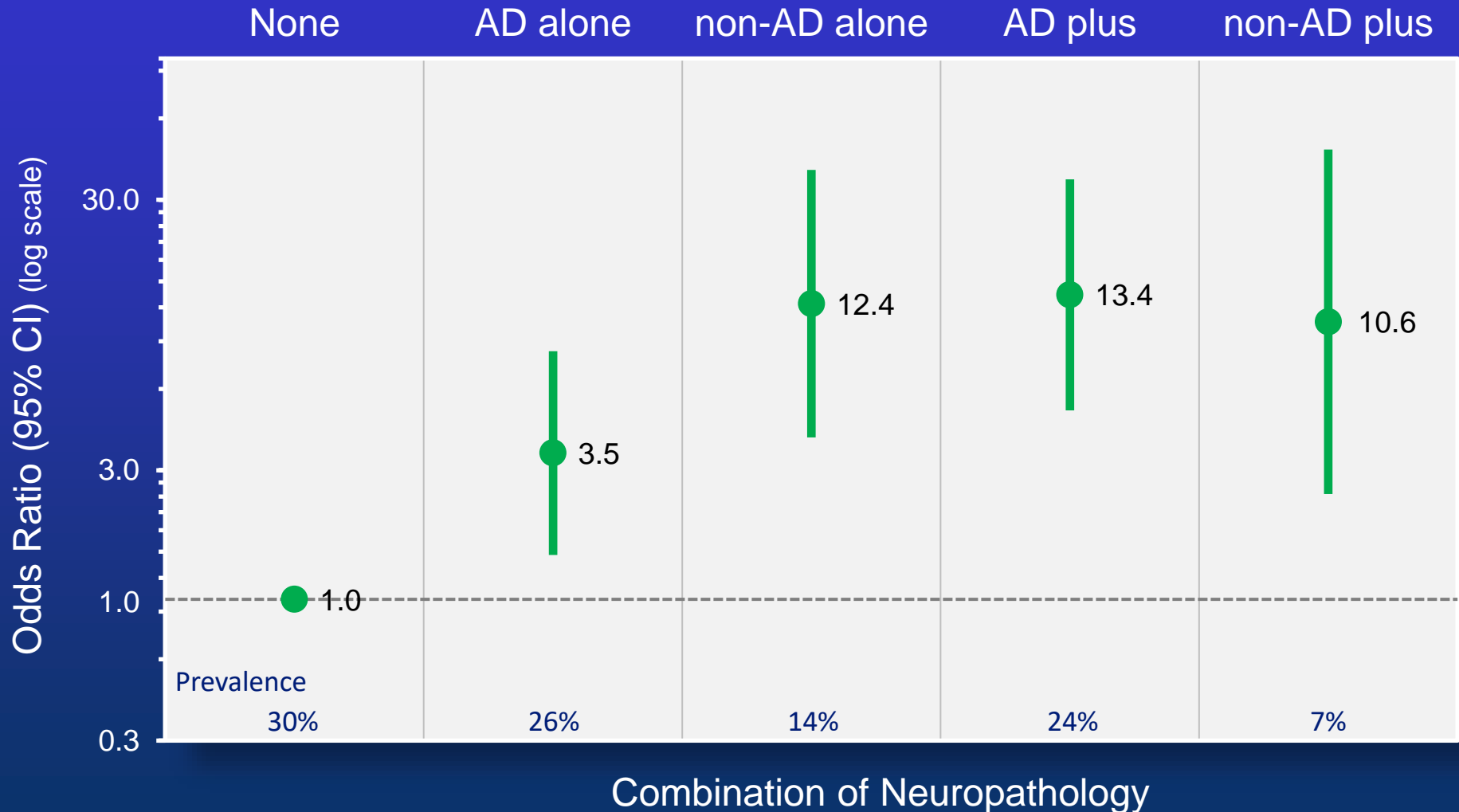
# Frequency of Dementia by Number of Pathologies



Pathologies: AD (Interm/High), LBD, Hippocampal sclerosis, vascular dementia, CBD  
Kawas, et al. Neurology (2015)

Only ~ 2/3 of dementia cases attributable to neurodegenerative pathologies

# Odds of Dementia by Combination of Neuropathology



# Some questions relevant to brain aging

- ❖ Is amyloid deposition (and other pathologies) in non-demented nonagenarians ***Resilience or Preclinical disease?***
- ❖ Is apparent *resilience to AD*, in part, merely the absence of other pathologies?
- ❖ What does age have to do with it and how do we measure it?
- ❖ In the absence of neurodegenerative disease, what are the biological underpinnings of age-related cognitive declines?

# Thank you!

## 90+ Study participants and families

### 90+ Investigators & Staff

**Maria Corrada** – co-Principal Investigator

Annlia Paganini-Hill

Dana Greenia

Ahmad Sajjadi

Farah Mozaffar

Jaime DeMoss

Christina Whittle

Zara Melikyan

Tina Liu

Thomas Trieu

Ryan Bohannan

Chad Caraway

Sarah Ashrafnia

Colette Aguirre

Montez Hester

Maria Kirkwood

Dan Hoang

Pinar Coskun

Natalie Bryant

Kristin Nguyen

Zeinah Al-darsani

Sara Sabeti

### Our Collaborators

Ronald Brookmeyer - UCLA

Charles DeCarli - UC Davis

Tom Montine - Stanford

John Trojanowski - U Penn

Josh Sonnen - U of Utah

### UCI

Ronald Kim

David Cribbs

Charles Glabe

Malcolm Dick

Carl Cotman

Frank LaFerla

Aimee Pierce

Dan Gillen

Mark Mapstone

Ed Monuki

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**Alzheimer's Association: NIRG-10-173916**



# 90+ Study Sharable Resources

[mcorrada@uci.edu](mailto:mcorrada@uci.edu)

## Longitudinal Clinical Data

- Demographics
- Neuropsych scores
- Cognitive diagnosis
- Medical hx, medications
- Physical performance
- etc, etc, etc.

## The 90+ Study Data and Tissue Resources

## NeuroImaging – UC Davis

- MRI antemortem N=239
- MRI postmortem N=55
- Amyloid PET N=317
- Tau PET N=86

## Neuropathology Data

- NACC form - UCI, Stanford
- Digital pathology images
- Microinfarcts - Sonnen
- A $\beta$  area, synaptic markers, etc. – UPenn (Trojanowski)

## Genetics

DNA storage,  
ApoE genotype  
Lymphoblastic cell  
lines  
NCRAD

## Post-Mortem Tissue Samples

- Frozen / fixed brain tissue
- Plasma /serum
- CSF
- Extracted DNA

The 90+ Study: R01AG021055, MPIs: C. Kawas, M. Corrada