

5 Themes Shaping the Future of Dementia & Alzheimer's Care

AAIC 2026 Recap

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Mary Patterson

VP of Clinical & Regulatory | BrainCheck

Five Themes Shaped This Year's Conference

1

Patient Targeting

The next bottleneck

2

Blood Biomarkers

Rapid evolution

3

Beyond Diagnosis

Care pathways matter

4

Digital Health

*Gaining real
momentum*

5

Prevention

Earlier, at scale



1 Patient Targeting Has Become the Next Bottleneck

- Finding the right patients at scale is now one of the biggest challenges in dementia care.
- Blood-based biomarkers and disease-modifying therapies are expanding fast, while health systems still lack efficient ways to identify who needs workup.
- The central question has moved past diagnosis, toward finding the right patients efficiently across millions of older adults.

AAIC Data Point: **75% of people with dementia globally remain undiagnosed.**
The challenge is increasingly not whether we can detect disease—but how health systems find the right patients at scale.-- *Davos Alzheimer's Collaborative*

THE SHIFT IN FRAMING

Old question

Can we diagnose Alzheimer's disease?

New question

How do we find the right patients, efficiently, at scale?



2 Blood Biomarkers Continue Their Rapid Evolution

- p-tau217 is building strong evidence for earlier risk identification.
- Plasma biomarkers are moving into primary care settings, not just specialty clinics.
- Automated lab platforms are expanding, supporting broader clinical implementation.
- The field is shifting from proving these biomarkers work to determining how to deploy them, since they remain underused and logistically complicated.

AAIC Data Point: **Primary care diagnostic accuracy: 65% → 93% with a blood test**

In a real-world study of >1,300 patients, family physicians reached 93% diagnostic accuracy after reviewing blood biomarker results—nearly identical to specialists at 94%.-- *Palmqvist et al., AAIC 2026*

WHERE THE FIELD IS HEADED

Proof → Deployment

From clinical validity to workflow integration

Underutilized

Adoption still lags behind the evidence



3 Diagnosis Alone Is Not Enough

- Presentations increasingly focused on care pathways, patient management, and caregiver support.
- Implementation science and real-world outcomes took center stage alongside diagnostic accuracy.
- The emphasis has broadened to the full patient journey, spanning assessment through longitudinal care planning.

AAIC Data Point: **3,089 blood biomarker tests ordered across 129 clinics**

Davos implementation experience shows that successful adoption requires more than assay availability—provider education, EHR integration, result-disclosure workflows, and cross-specialty coordination all matter.-- *Davos Alzheimer's Collaborative*

THE FOCUS HAS EXPANDED

Then

Diagnostic accuracy

Now

Diagnosis + care pathway + outcomes



4 Digital Health Continues to Gain Momentum

- Digital assessments, remote monitoring, AI, and scalable clinical decision support were featured throughout the conference.
- Multiple organizations shared data showing brief digital assessments can effectively identify patients who should proceed to biomarker testing.
- Interest in technology-enabled clinical workflows is accelerating across the field.

A RECURRING FINDING

Brief digital tools

Can effectively triage patients toward biomarker testing



5 Prevention and Early Detection Continue to Expand

- Earlier identification of at-risk individuals remains a growing priority.
- Lifestyle interventions for brain health are gaining scientific attention.
- Population-level screening strategies and personalized prevention approaches were both well represented.

AAIC Highlight: **\$100M PROTECT-Cog trial announced at AAIC 2026**

The new global study will test whether combining a multidomain lifestyle intervention with a metabolism-targeting therapy such as a GLP-1 can further reduce cognitive decline, MCI, and dementia.

PREVENTION IN FOCUS

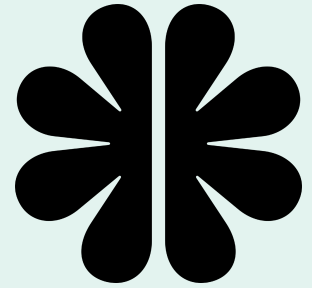
Earlier

Identification of at-risk individuals

Broader

Population-level screening strategies





RESEARCH SPOTLIGHT

BrainCheck Studies Presented at AAIC 2026

01

Validating a Digital Cognitive Assessment Against the MoCA

STUDY DESIGN

176 older adults across multiple clinical sites

KEY RESULTS

$r = 0.80$

Strong correlation between digital assessment and MoCA scores

Strong ROC

Discrimination across normal cognition, MCI, and dementia

Mapped

Score-mapping functions built for reliable translation between instruments

Why it matters: gives clinicians a basis for interpreting digital assessment results with the same confidence as the MoCA, particularly where paper-based administration is difficult or inconsistent.



Longitudinal Outcomes Following Digital Cognitive Care Planning

STUDY DESIGN

2,488 patients aged 50+, multiple practices, 2022–2025

KEY RESULTS

↓ Anxiety

Significant annual reduction (GAD-7)

↓ Depression

Patient and caregiver symptoms both improved

↑ Function

Daily functioning improved (Katz Index)

Why it matters: consistent improvement across varied clinical environments and practice types offers real-world evidence that a structured care pathway and engagement benefits both patients and caregivers.



Translating a Digital Assessment for European Populations

STUDY DESIGN

416 participants across 5 countries, via the PREDICTOM consortium

KEY RESULTS

5 languages

Norwegian, Dutch, Spanish, German, French

98.3%

Completion rate across varied populations and devices

Validated

Reviewed by native speakers for cultural and linguistic accuracy

Why it matters: supports the feasibility of broad international deployment for early dementia detection, at a time when screening rates across many European systems remain low.



Questions?



Mary Patterson

VP of Clinical & Regulatory | BrainCheck
mary.patterson@braincheck.com

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