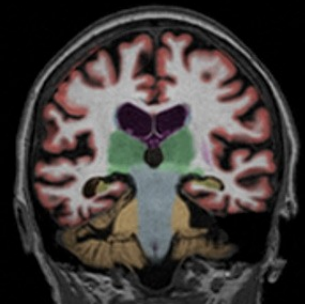


## CLINICAL INDICATIONS FOR NEUROQUANT<sup>®</sup>

Alzheimer's (AD) • Dementia • Memory loss • Mild Cognitive Impairment (MCI)

### Value of Quantitative MRI for Alzheimer's Disease Risk Stratification

- Patients 50 years of age or older with a diagnosis of MCI, which is considered a possible transitional stage towards AD, can now have a non-contrast MRI to quantitatively evaluate for increased brain atrophy. (Patients can now be monitored to see if the progression is accelerating, and the rate of acceleration, to help in the early detection of the transition from MCI to AD.)
- Patients with MCI who have a small hippocampus (HC) (a brain structure critical for memory) are 4x more likely to progress to AD in 2-3 years than patients with a large hippocampus. (The brain in a healthy patient shrinks at about 1% a year, while the hippocampus of an Alzheimer's patient shrinks at 5 times that rate)
- The NeuroQuant<sup>®</sup> automated system can evaluate the patient's exam, and compare the results to the ADNI database to see if the patient falls into the range of normal for his or her age group.
- Quantitative analysis may help demonstrate disease modifying effects potential new treatments, and may help identify those patients most likely to benefit from aggressive intervention.
- Although normal HC volumes can't rule out AD, normal HC volumes may be reassuring to a high functioning patient extremely concerned about mild, but increasing memory failures.



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