ADNI Biostatistics Conference Call
29 July 2008

Present on call: Laurel Beckett, Hao Zhang, Fred Immerman.

Laurel reported that the presentation to ICAD on Saturday 26 July went really well. Ron Petersen presented some of Mike Donohue's and Anthony Gamst's analysis as well as some of ours, Bill Jagust showed some very interesting PET results, and our summary went well. There were a lot of questions, some of course pointing to analyses for the future when we have more data. It's clear that both NIH and industry are strongly interested in continuing support so prospects for ADNI II look good; the details will depend to some extent on what else we find.

Mike Weiner has sent email reminding us that there will be another meeting in DC in October, and that he hopes to have analysis of all the first-year data complete for presentation in April, 2009. Laurel wants to be sure that a) we have all the imaging summary data in plenty of time, not just 6 weeks for rushed analysis this time, and b) the people using data-driven summaries are very careful to use only the training set (or the 90% sets if they do a drop 10% out approach) to develop their method. She and Danielle will put together a timetable and work with Mike W on it during August.

Fred's group has been looking at ADNI and comparing CSF biomarkers with some of their own clinical trial data (mild AD). They found some data similar but some was farther away than expected. They are working with the biomarker lab to identify the source of differences. They also have some new Phase II data about to come out and they raise interest in E4 status and its effect, so they are looking at stratifying. He suggests that we may need to stratify when sample sizes permit. We don't have enough data to stratify yet in AD for comparisons but maybe in MCI we could start looking (Fred is doing this a little already.)

Fred and Laurel talked about ideas for development and testing of potential diagnostic markers. ADNI represents a "floor case" in that we have 3 very distinct groups; if you can't tell them apart, a marker is probably not going to work in the community at all. But good performance in ADNI would still need to be validated in a truly population-based setting. We thought that some studies (Framingham, ROS, MAP, CHAP?) might have either imaging or serum available for a collaborative study if we eventually have strong data on some potential diagnostic markers.

The next scheduled call is 12 August but we will probably poll to see how many people really are available for that; we might cancel if it is as small as today's call.