Prolonged Non-Drug Therapy Studied in Alzheimer's Patients

Health care company Accera, Inc. recently announced the publication of results in *Neuropsychiatric Disease and Treatment* involving a retrospective review of medical records for patients taking Axona®, a prescription-only medical food that addresses a crucial aspect of Alzheimer's disease (AD) known as diminished cerebral glucose metabolism (DCGM). DCGM is characterized by the brain's inability to effectively metabolize glucose, its primary energy source.

Patient outcomes were evaluated by a total of 55 chart reviews conducted at 11 practices in which Axona was prescribed to patients with mild-to-moderate AD for 6 months or longer. Primary outcome measures for the study were the Physician's Overall Assessment of Patient Status for each individual patient at the most recent assessment on Axona and change in Mini-Mental State Examination (MMSE) score at the most recent MMSE assessment on Axona. Secondary measures included changes from baseline in patient's living situation; medication changes for the treatment of AD and for psychiatric symptoms related to AD; changes in patient's memory and ability to carry out instrumental activities of daily living (ADLs) as assessed by caregivers; and adverse events.

Results from the study suggest that administration of Axona in patients with mild-to-moderate AD helped stabilize or improve the clinical status and cognitive function in patients receiving this therapy for an average of approximately 19 months. Physician's Overall Assessment of Changes from baseline indicated that approximately 80% of patients either showed improvement or remained stable. Caregiver assessments also indicated stability or improvement for cognitive function and no significant changes in the ability to carry out ADLs.

Accera, sponsor of the study, currently markets Axona. In clinical trials, this approach has been shown to safely enhance memory and cognitive function by inducing safe, therapeutic, tolerable, and predictable levels of ketosis in patients with mild-to-moderate AD.

Source. "Accera, Inc. Announces Publication of Results in the Journal Neuropsychiatric Disease and Treatment of a Retrospective Cohort Study Examining the Effects of Axona® in Patients with Mild-to-Moderate Alzheimer's Disease." (2013, October 28). Retrieved November 19, 2013, from http://prn.to/19MS1Lj.

Post-Stroke Recovery Treatment Reduces Early Cardiovascular Events

NeuroAiD™, a treatment of post-stroke recovery containing natural extracts, reduces early cardiovascular events and deaths by approximately 50% in combination with antiplatelet agents within 3 months after stroke onset, without an increase in bleeding rate and non-vascular deaths, according to research published online in the journal *Stroke*.

The CHIMES study is an academic international double-blind placebo-controlled clinical trial in 1,099 patients having experienced an ischemic stroke of intermediate severity within 72 hours, treated by NeuroAiD or placebo and monitored for 3 months.

Considering the positive effects of NeuroAiD on cerebral blood flow and a potential role in "ischemic preconditioning," CHIMES researchers hypothesized that NeuroAiD may have an effect on preventing the occurrence of early vascular events after stroke onset. They analyzed a composite outcome consisting of vascular events and vascular deaths, all events being blindly adjudicated. NeuroAiD was given in combination with secondary prevention therapies such as antiplatelet drugs, statins, and antihypertensive, and antidiabetic treatments.

As a result, the vascular outcome occurred in 16 patients (2.9%) of the NeuroAiD group, as opposed to 31 patients (5.6%) in the placebo group ($p = 0.025$). This represents half the rate of early cardiovascular events and deaths, which corresponds to approximately 27 fewer patients experiencing a recurrent vascular event or death per 1,000 patients treated over 3 months.

Source. "NeuroAiD™, a Treatment for Post-Stroke Recovery, Reduced Early Cardiovascular Events and Deaths by Half After Stroke." (2013, October 21). Retrieved November 19, 2013, from http://prn.to/I3lnft.

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