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US Infusion Center Capacity to Accommodate Anti-Amyloid Treatments for Alzheimer's Disease: A Quantitative Survey

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PRESENTATION DOCUMENTS

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OBJECTIVES: Estimates suggest that approximately 5-7 million US adults have mild cognitive impairment due to Alzheimer's disease (AD) and an additional 2 million have mild AD dementia, making them potentially eligible for new AD disease-modifying therapies. As these therapies are administered intravenously, infusion center (IC) capacity could become an obstacle to treatment access. This study evaluates the current and future IC capacity to deliver anti-amyloid IV treatments for AD.

METHODS: A questionnaire was fielded in November 2023 among IC respondents in the US with at least 2 years of experience in the role of overseeing IC capacity and operations.

RESULTS: The study included 50 US respondents representing unique standalone (50%), hospital-based (26%), and neurology office-based (24%) ICs; 44% (n=22) oversaw a single site IC and 56% (n=28) oversaw a total of 382 centers. Respondents indicated current capacity utilization is on average 83% (range 60%-100%), with 30% (n=15) currently experiencing capacity constraints at their ICs. Among respondents experiencing constraints, 93% (n=14)

reported capacity limitations can lead to delayed treatment initiation, missed doses, or delayed doses. 34% (n=17) indicated they currently offer anti-amyloid infusions and can accommodate additional AD patients, and 44% (n=22) reported that their ICs currently do not offer anti-amyloid infusions. Of all respondents, 44% (n=22) prioritized infusion appointment scheduling for patients with severe/rare diseases and comorbidities. Among ICs that plan to offer anti-amyloid treatments in the next five years, 53% (n=25/47) will need to expand their center(s) to treat more patients with AD.

CONCLUSIONS: ICs are operating at high-capacity utilization on average with current patient volume, raising concerns about the ability to accommodate additional patients now or in the future. Capacity constraints may be further exacerbated with increased availability and demand for anti-amyloid therapies. This study suggests that patients with AD may face challenges with treatment access at ICs.

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