

Discussing ARIA and Finalizing Treatment Decisions Through Shared Decision-Making

Use this guide to support clear, balanced conversations with patients and caregivers when considering anti-amyloid therapy and ARIA risk.

Review evaluation findings and clearly communicate results

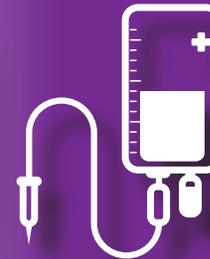
- Review clinical evaluation findings, including cognitive assessments and confirmation of amyloid pathology
- Explain key baseline MRI findings, highlighting any features relevant to ARIA risk
- Discuss APOE genotype results, if available, and their implications for ARIA risk in clear, simple language
- Confirm the patient and their caregivers have understanding of the diagnostic findings before proceeding



Discussing treatments and ARIA with patients and caregivers

Discuss treatment aspects in detail

- Review the potential benefits, risks, and limitations of anti-amyloid treatment
- Discuss individual risk factors for ARIA, including imaging findings and genetic considerations
- Explain the possibility of infusion-related reactions and other serious adverse events
- Outline treatment requirements, including monthly infusions, required monitoring, surveillance MRIs, office visits



Explore alternatives and align with patient values



- Discuss alternative approaches to Alzheimer's disease management, including supportive and non-pharmacologic strategies
- Explore how treatment aligns—or does not align—with the patient's personal goals, values, and preferences
- Encourage questions and allow time for reflection
- Consider obtaining informed consent or assent and document the patient's and caregivers' understanding and agreement to proceed with treatment

Ensure adherence to treatment



- Confirm the patient's and caregivers' ability and commitment to adhere to the full treatment and monitoring plan
- Ensure they understand the importance of MRI surveillance and follow-up visits
- Discuss expected treatment duration and the possibility of treatment interruption or discontinuation
- Consider limited-duration treatment if follow-up amyloid imaging is not feasible
- Establish a shared plan for reassessment and ongoing decision-making over time

REFERENCE | Alzheimer's Association. <https://pro.alz.org/files/download/DBB34343-2D0C-42BF-9101-42A32583CA37.pdf>. Accessed 1/22/2026.
APOE = apolipoprotein E; ARIA = amyloid-related imaging abnormalities; MRI = magnetic resonance imaging.