

A Translational Approach to a Therapeutic Intervention with Physical Activity for Neurological/Cognitive Dysfunction



BASS CONNECTIONS

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Bass Connections in Brain & Society

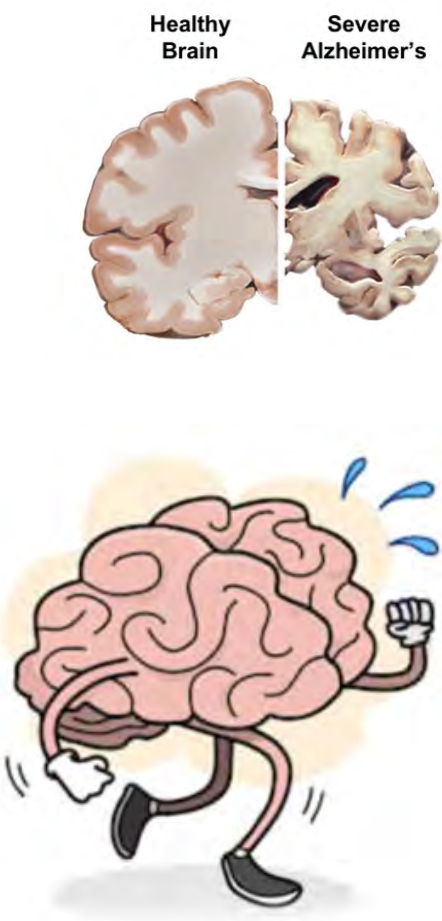
MOUSE: Alzheimer's Disease

Can physical fitness ameliorate cognitive impairment and neuroinflammation in neurological/cognitive dysfunctions?

HUMAN: Post-Traumatic Stress Disorder

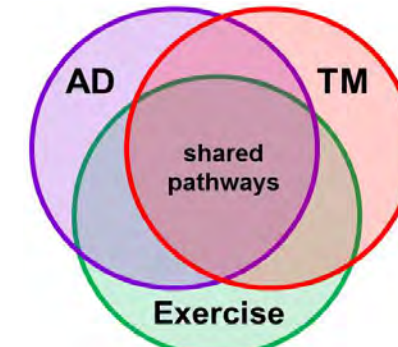
Background

- Alzheimer's Disease**
- AD is an age-related, neurodegenerative disease that causes neuronal damage and death and leads to cognitive impairment
 - High incident rate in women may be explained by loss of ovarian function during menopause
- Neuroprotective Effects of Exercise**
- Physical exercise has been associated with reduction in rates of cognitive decline



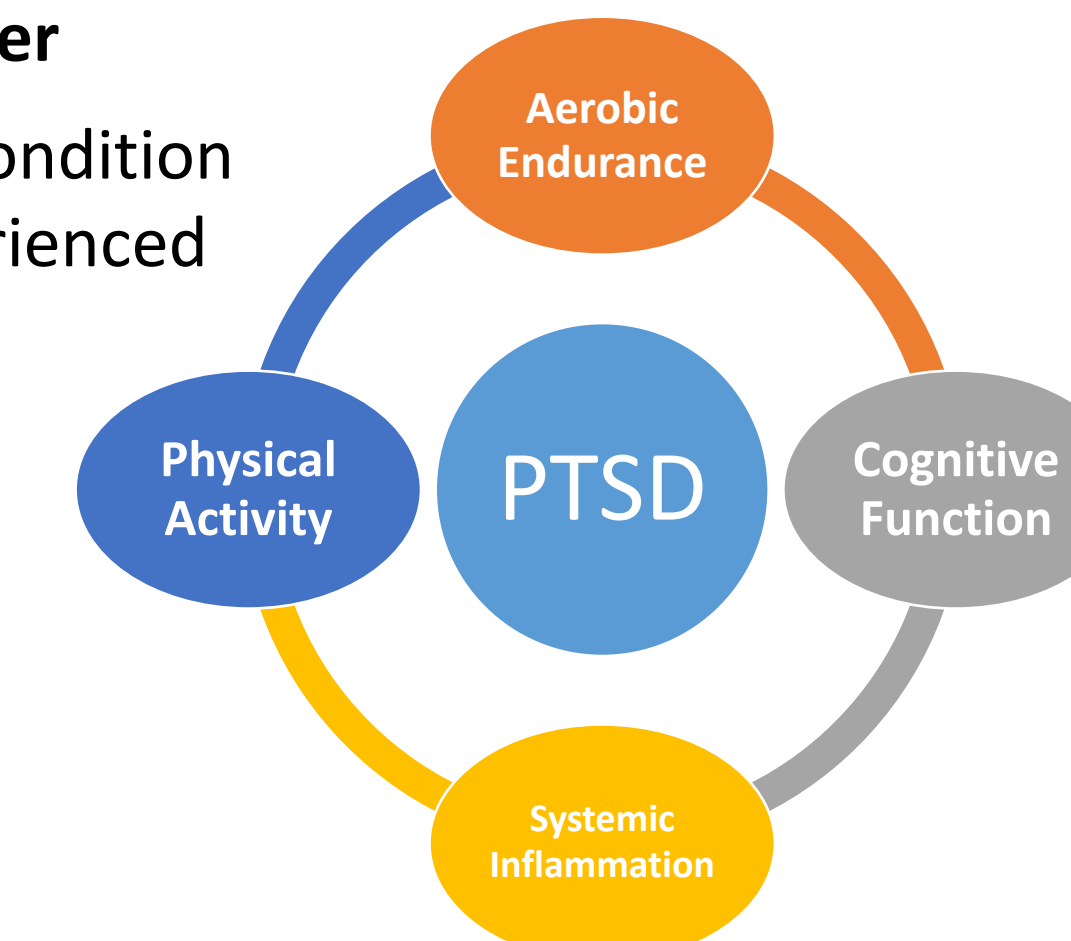
Aims/Research Questions

- Aims**
- Demonstrate how exercise can delay cognitive decline in AD
 - Determine how progressive neuroinflammation in an AD mouse model is influenced by exercise
- Research Question**
- Does 12 weeks of exercise begun just after ovarian failure (Transitional Menopause) protect against memory loss and neuroinflammation in a mouse model of AD?



Background

- Post-Traumatic Stress Disorder**
- PTSD is a mental health condition that is caused by an experienced traumatic event

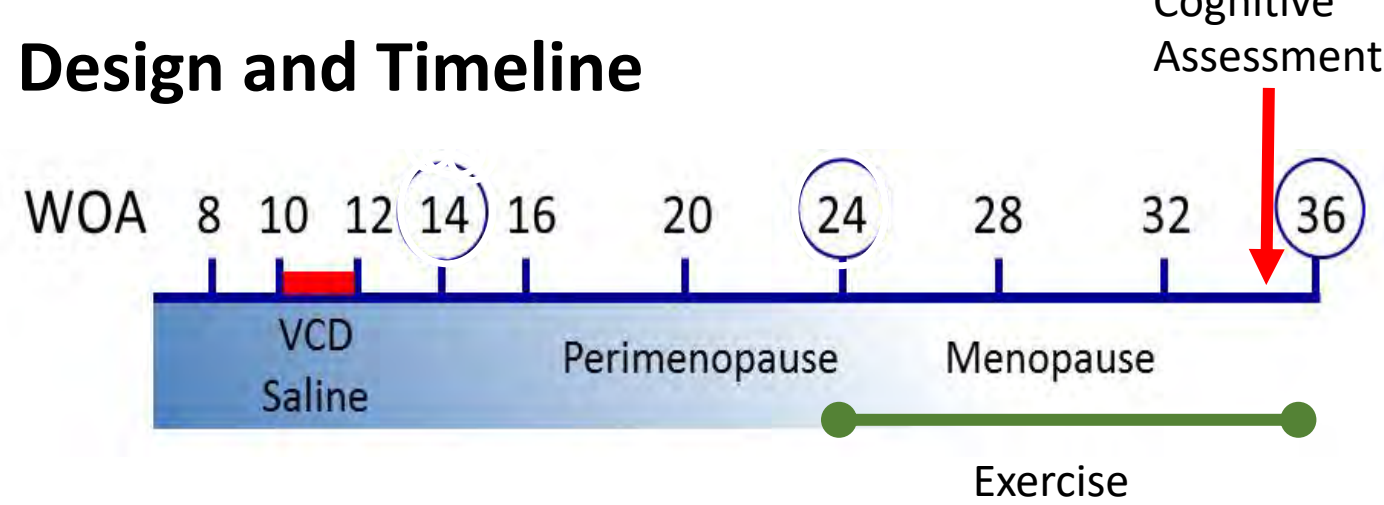


Aims/Research Questions

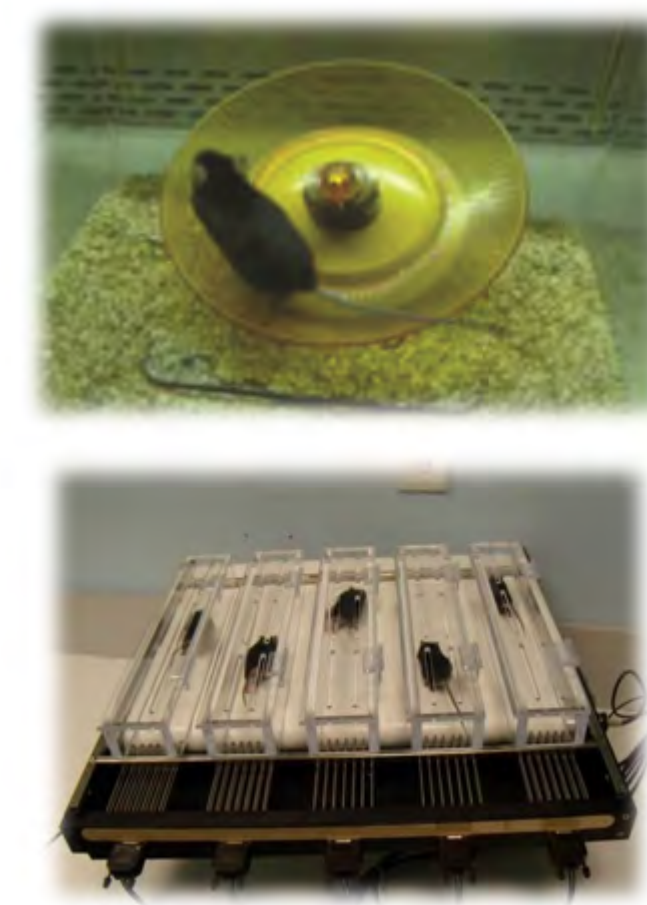
- Aims**
- To explore the relationship between PTSD, Inflammatory Markers, Physical Activity, and Cognitive Function
- Research Questions**
- How do changes in physical activity levels affect aerobic endurance and inflammatory biomarker concentrations among patients with PTSD following a 12-month physical activity intervention?
 - How do differing baseline physical activity levels affect the presence of inflammatory biomarkers and cognitive function in PTSD patients prior to a 12-month physical activity intervention?

Methodology

- Female Alzheimer's Mouse Model – CVN-AD**
- develops human AD-like pathogenesis
 - transitional menopause induced by ovariectomy VCD which kills ovarian follicles

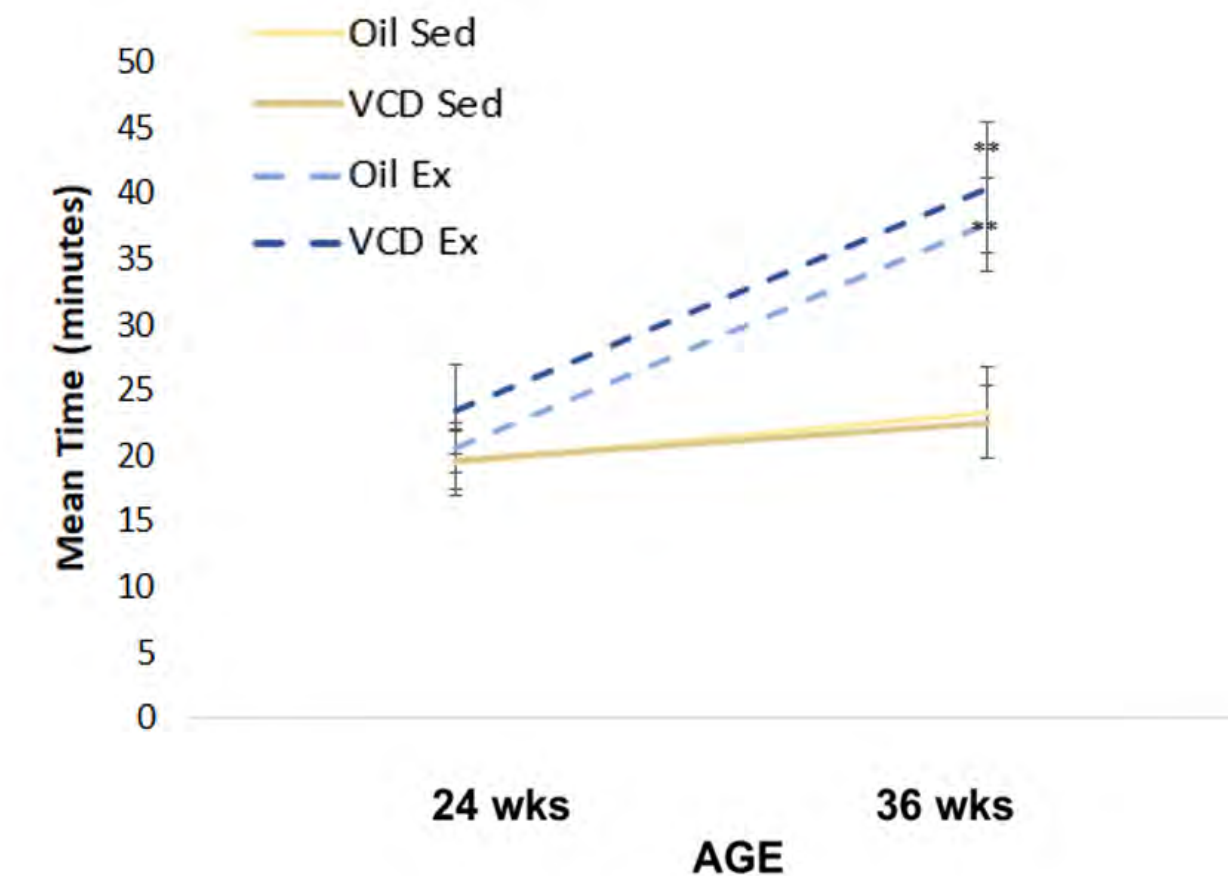


- Exercise**
- From 24-36 WOA mice ran on wheels for 6-8 hours/day, 5 days/week and underwent forced treadmill training for 45 minutes, 2 days/week



Exercise increased fitness of CVN-AD mice on a treadmill endurance test

- Time to Exhaustion Endurance Test**
- For every 2 minutes, the speed of the treadmill increases by the same factor until mice are no longer able to run



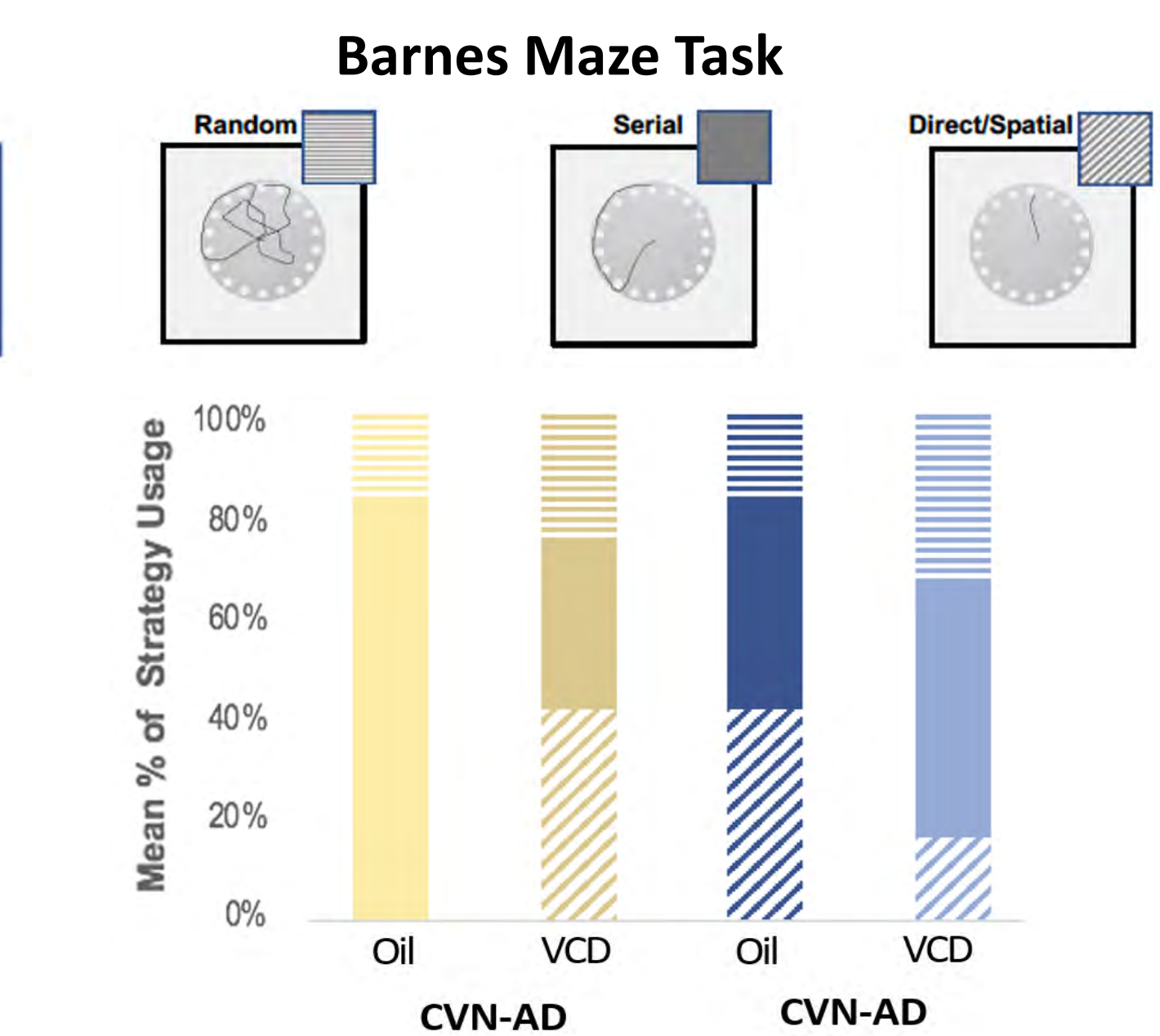
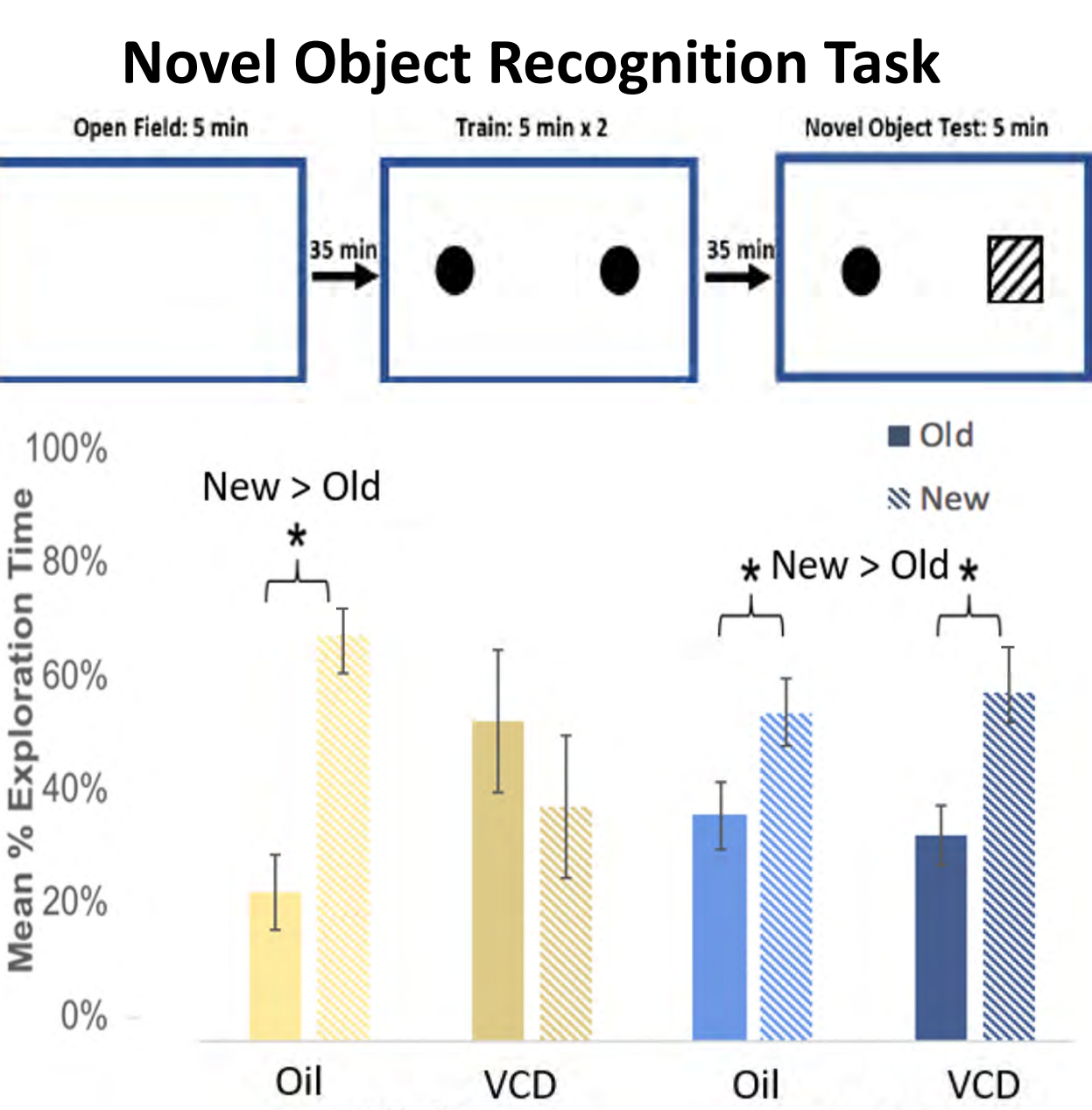
Methodology

- Sample**
- 302 older patients with pre-diabetes (67 with PTSD)
- Enhanced Fitness Intervention**
- 12 month telephone physical activity counseling
 - Measures Collected at baseline and at 12 mos.
- Cognitive Function - AD8 (baseline only)**
- Scores: 0-1 = normal cognition, ≥ 2 = cognitive impairment
- Systemic Inflammation**
- 9 serum cytokines collected for each individual
- Aerobic Fitness – 6 Minute Walk Test (6MWT)**
- Participants instructed to walk as far as they can in 6 minutes
- Statistics**
- Between-group comparisons (PTSD vs. No PTSD): t-tests
 - Associations between variables: bivariate correlations

Table 1. Participant Characteristics at Baseline by PTSD Status

Variable	Without PTSD (n= 235)	With PTSD (n = 67)	With vs. Without PTSD (p-value)
Age (yr)	68.6 ± 6.2	62.9 ± 3.9	< 0.01
Race (%)			< 0.01
African-American	21.8	47.8	--
Caucasian	76.5	49.3	--
No. of Comorbidities	3.9 ± 2.4	4.5 ± 2.3	0.11
Body Mass Index (kg/m ²)	31.2 ± 3.6	31.3 ± 3.7	0.85
AD8 Scores	1.10 ± 1.67	3.40 ± 2.64	< 0.01
6-Minute Walk Task (m)	1621.2 ± 385.9	1675 ± 354.4	0.30
Physical Activity (min)	118.2 ± 184.8	89.8 ± 127.5	0.24

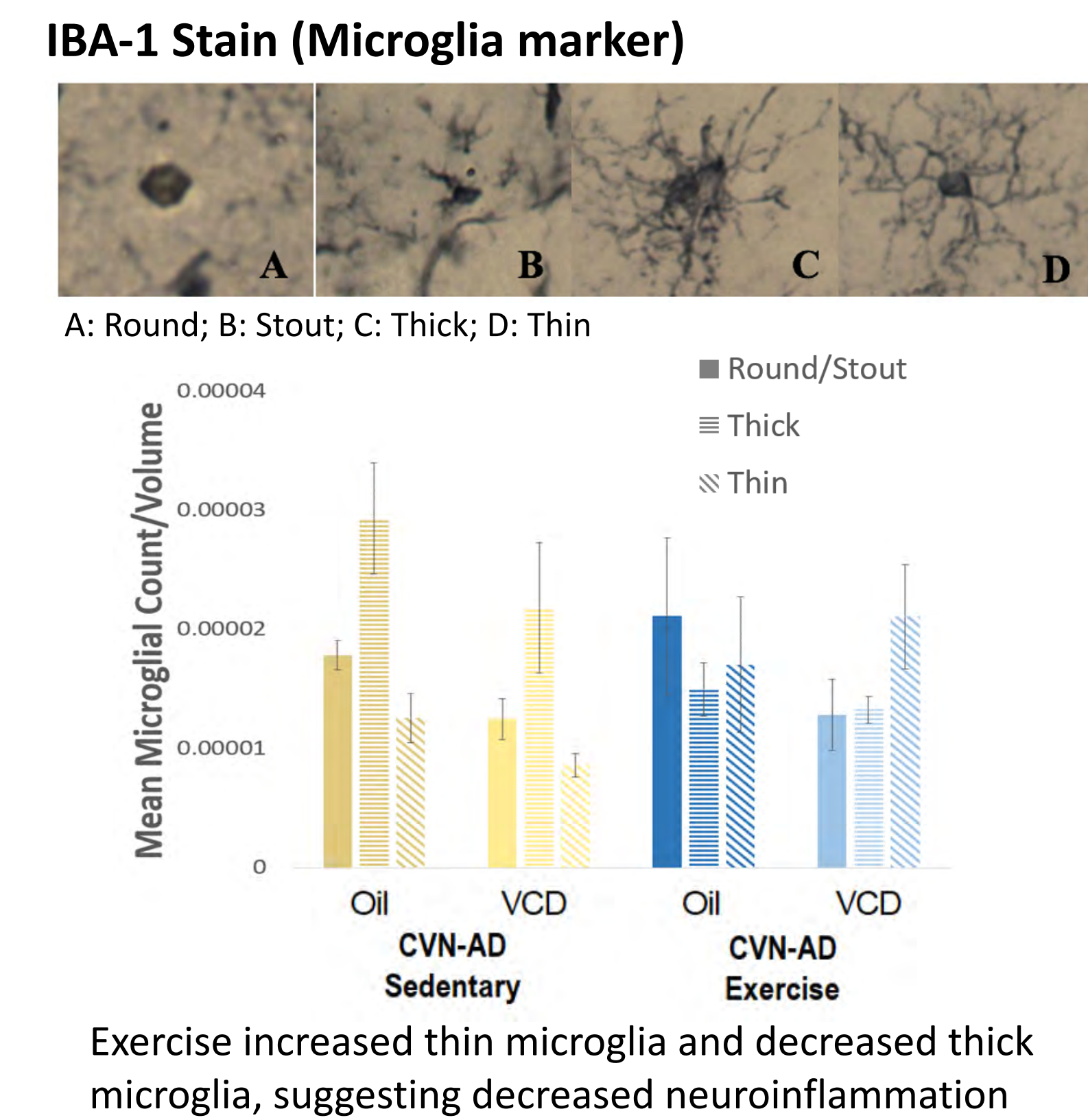
Exercise improved short term episodic memory and increased use of a hippocampal strategy



Exercise prevented the impairment in short-term memory induced by loss of ovarian function in CVN-AD

Exercise increased the use of a hippocampal direct strategy to locate the escape hole in cycling CVN-AD mice, but was unable to provide similar neuroprotective effects in menopausal CVN-AD mice

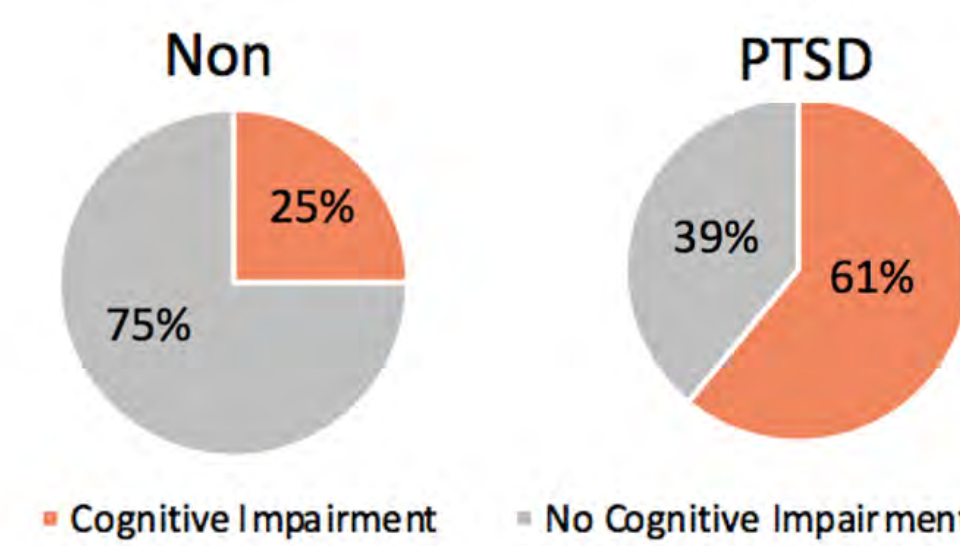
Exercise decreased neuroinflammation



Exercise increased thin microglia and decreased thick microglia, suggesting decreased neuroinflammation

Relationships with Cognitive Function

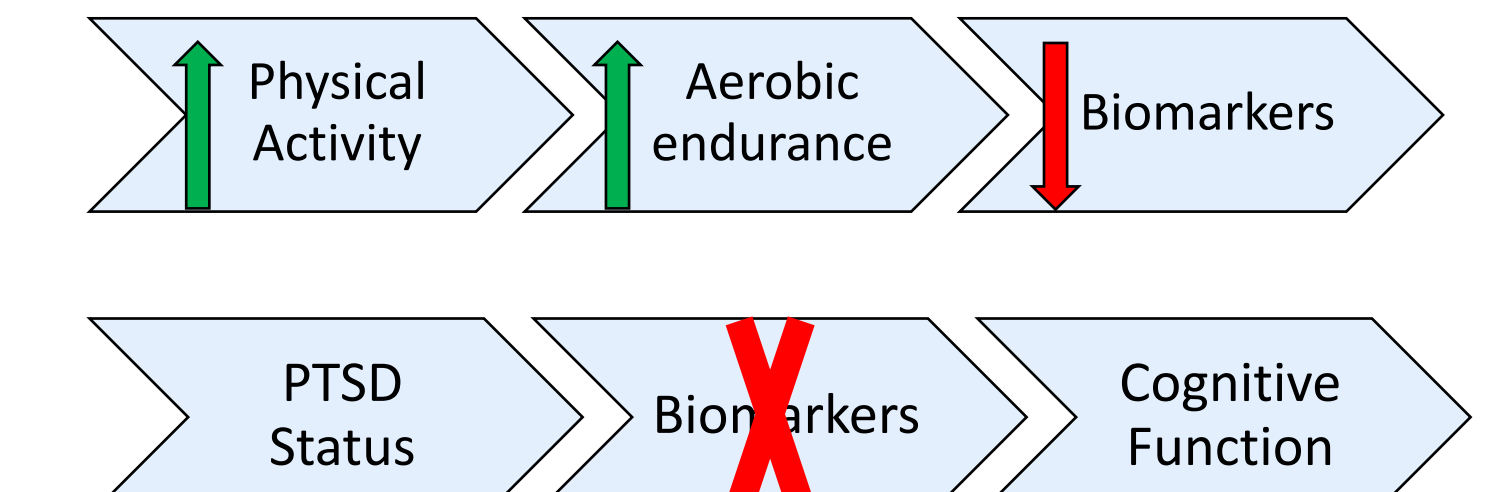
- Results:**
- Cross-Sectional Associations**
- PTSD vs. Non on AD8
 - PTSD \propto sig. worse cognitive function ($p < .01$)
 - AD8 w/ 6MWT, PA (PTSD only)
 - N.S.
- Longitudinal Associations**
- AD8 w/ changes in PA, 6MWT
 - Δ PA ($r = -.33, p < .05$)
- Conclusion:** Having High Physical Activity leads to Increased 6MWT, which leads to Higher Cognitive Function.
- In PTSD vs. non-PTSD patients:**
- Limitations:** AD8 only at baseline



Relationships with Inflammatory Biomarkers

- Results:**
- Cross-Sectional Associations**
- PTSD vs. Non on Inflammatory markers (BM)
 - PTSD \propto \downarrow BM levels (D-Dimer, HA, TNFR1, VCAM); $p < .10$
 - AD8 and BM (PTSD only)
 - VCAM ($r = -.09$), IL8 ($r = .24$), $ps < 0.05$
- Longitudinal Associations**
- Changes in PA, 6MWT, and changes in BM (PTSD only)
 - Δ PA: IL6 ($r = -.13$), TNFa ($r = -.13$), TNFR1 ($r = -.11$), TNFR2 ($r = -.14$); $ps < .10$
 - Δ 6MWT: Δ HA ($r = -.15$), IL6 ($r = -.17$); $ps < .05$

Conclusions:



MOUSE: Alzheimer's Disease

CONCLUSION: Physical activity is a non-invasive intervention to ameliorate cognitive impairment in neurological/cognitive dysfunctions

HUMAN: Post-Traumatic Stress Disorder