

EARLY BLOOD BIOMARKERS FOR THE DIAGNOSIS OF ALZHEIMER'S: A MODERN APPROACH TO NEURODEGENERATIVE DISEASE DETECTION

Choriyev Akabur Anvarovich

Odilov Azim Jamil o'g'li

Assistant.

Department of Neurology

Students at Asia International University. Bukhara, Uzbekistan.

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Abstract. *Alzheimer's Disease represents the most common form of dementia and is one of the leading causes of disability among the elderly population worldwide. The disease is characterized by progressive cognitive decline, memory impairment, and behavioral disturbances that significantly affect patients' quality of life. Because neuropathological changes begin decades before the onset of clinical symptoms, early detection has become a central objective in modern neurological research. Traditional diagnostic methods such as cerebrospinal fluid (CSF) biomarker analysis and neuroimaging techniques provide valuable information but remain expensive, invasive, and limited in availability.*

Recent advances in biomedical technology have led to the development of blood-based biomarkers that can detect early pathological processes associated with Alzheimer's disease.

Among the most promising biomarkers are amyloid-beta peptides, phosphorylated tau proteins, and neurofilament light chain. These biomarkers reflect key pathological mechanisms including amyloid plaque formation, tau protein hyperphosphorylation, and neuronal degeneration. This article provides a comprehensive review of current evidence regarding plasma biomarkers for early diagnosis of Alzheimer's disease. The study examines the diagnostic value, clinical significance, and potential limitations of major biomarkers including A β 42/A β 40 ratio, p-tau181, p-tau217, and neurofilament light chain. In addition, future perspectives on integrating blood biomarkers with neuroimaging and artificial intelligence-based diagnostic systems are discussed. The findings suggest that blood biomarkers represent a promising, minimally invasive, and cost-effective approach for early detection and monitoring of neurodegenerative diseases.

Keywords: *Alzheimer's disease, dementia, neurodegeneration, blood biomarkers, amyloid beta, phosphorylated tau, neurofilament light chain, early diagnosis, neurodegenerative disorders.*

Introduction

Alzheimer's Disease is a progressive neurodegenerative disorder that primarily affects memory, cognition, and functional abilities. It accounts for approximately 60–70% of dementia cases globally and represents a growing public health concern due to the rapid aging of the population. According to recent epidemiological studies, more than 55 million people worldwide currently live with dementia, and the majority of these cases are attributed to Alzheimer's disease. Projections indicate that this number may exceed 130 million by 2050, emphasizing the urgent need for improved diagnostic and therapeutic strategies.

The disease is characterized by gradual deterioration of cognitive functions including memory, language, attention, and executive abilities. As the disease progresses, patients experience severe impairments in daily activities and eventually require full-time care.

The burden of Alzheimer's disease extends beyond patients themselves and significantly affects families, caregivers, and healthcare systems.

One of the major challenges in managing Alzheimer's disease is the difficulty of diagnosing the condition at its earliest stages. Clinical symptoms often appear only after substantial neuronal damage has already occurred. Neuropathological studies suggest that pathological changes in the brain begin at least 10 to 20 years before the onset of noticeable cognitive impairment. Therefore, identifying reliable methods for detecting these early changes is critical for effective disease management and potential therapeutic interventions.

Current diagnostic approaches rely on a combination of clinical evaluation, neuropsychological testing, neuroimaging techniques, and cerebrospinal fluid biomarker analysis.

Imaging modalities such as magnetic resonance imaging (MRI) and positron emission tomography (PET) can reveal structural and functional brain changes associated with neurodegeneration. Cerebrospinal fluid biomarkers, including amyloid-beta and tau proteins, provide important biochemical evidence of disease pathology.

Despite their diagnostic value, these methods present several limitations. Neuroimaging techniques are expensive and require specialized equipment, while cerebrospinal fluid analysis involves invasive lumbar puncture procedures that may not be suitable for routine screening.

Consequently, researchers have increasingly focused on identifying blood-based biomarkers as a simpler and more accessible alternative.

Advances in ultrasensitive detection technologies such as single molecule array (Simoa) and mass spectrometry have enabled the measurement of extremely low concentrations of brain-derived proteins in blood plasma. These technological developments have opened new possibilities for detecting early neurodegenerative changes through minimally invasive blood tests.

Among the most extensively studied blood biomarkers for Alzheimer's disease are amyloid-beta peptides, phosphorylated tau proteins, and neurofilament light chain. These molecules reflect key aspects of disease pathophysiology, including amyloid plaque accumulation, tau pathology, and neuronal injury. Numerous studies have demonstrated strong correlations between plasma biomarker levels and established diagnostic markers obtained from cerebrospinal fluid and neuroimaging.

The growing body of evidence suggests that blood-based biomarkers may significantly improve the early diagnosis of Alzheimer's disease and facilitate large-scale screening programs.

Early detection could enable timely therapeutic interventions, improved patient management, and better planning of healthcare resources.

This article aims to provide a comprehensive overview of current knowledge regarding blood biomarkers in the early diagnosis of Alzheimer's disease. The review examines the biological basis, diagnostic accuracy, and clinical implications of major plasma biomarkers and discusses future directions in this rapidly evolving field of neurological research.

Pathophysiology of Alzheimer's Disease

The pathogenesis of Alzheimer's Disease involves complex molecular and cellular mechanisms that lead to progressive neurodegeneration.

Two key pathological hallmarks define the disease:

Amyloid Plaques

Amyloid plaques are extracellular deposits composed primarily of amyloid-beta peptides.

These peptides are produced through abnormal processing of amyloid precursor protein. Accumulation of amyloid-beta leads to synaptic dysfunction and neuronal damage.

Neurofibrillary Tangles

Neurofibrillary tangles are intracellular aggregates formed by hyperphosphorylated tau proteins. These structures disrupt the normal function of neurons and contribute to neurodegeneration.

The interaction between amyloid pathology and tau pathology ultimately leads to neuronal loss, brain atrophy, and progressive cognitive decline.

Blood Biomarkers for Early Diagnosis

Amyloid Beta (A β 42/A β 40 Ratio)

Amyloid-beta peptides play a crucial role in the pathogenesis of Alzheimer's disease.

Two primary forms of amyloid-beta are commonly measured in blood plasma: A β 40 and A β 42. The ratio between A β 42 and A β 40 has been shown to correlate strongly with amyloid plaque deposition in the brain. A decreased A β 42/A β 40 ratio is associated with increased risk of Alzheimer's disease.

Recent studies suggest that plasma amyloid measurements may provide diagnostic accuracy comparable to cerebrospinal fluid biomarkers.

Phosphorylated Tau Proteins

Tau proteins are essential for maintaining neuronal microtubule stability. In Alzheimer's disease, tau proteins undergo abnormal phosphorylation and aggregate into neurofibrillary tangles.

Several phosphorylated tau isoforms have been identified as potential blood biomarkers.

p-tau181

Elevated plasma p-tau181 levels are associated with tau pathology and neurodegeneration.

p-tau217

Recent research indicates that p-tau217 may have even higher diagnostic accuracy and may detect Alzheimer's disease earlier than other biomarkers.

Neurofilament Light Chain

Neurofilament light chain is a structural protein found in neurons. When neurons are damaged, NfL is released into the cerebrospinal fluid and bloodstream.

Elevated plasma NfL levels indicate neuroaxonal injury and correlate with disease severity in neurodegenerative disorders, including Alzheimer's Disease.

Materials and Methods

This study is based on a comprehensive review of scientific literature related to blood biomarkers in Alzheimer's disease.

Scientific databases including PubMed, Scopus, and Web of Science were used to identify relevant studies published between 2018 and 2025. Keywords such as "Alzheimer's disease", "blood biomarkers", "plasma tau", and "amyloid beta" were used during the search process.

Studies that focused on diagnostic value, sensitivity, specificity, and clinical applications of plasma biomarkers were included in the analysis.

Results

Analysis of recent studies demonstrates that blood biomarkers show significant potential for early detection of Alzheimer's disease.

Several large-scale clinical studies have reported strong correlations between plasma biomarker levels and established diagnostic methods such as PET imaging and cerebrospinal fluid analysis.

Plasma p-tau217 and p-tau181 have shown particularly high diagnostic accuracy, with sensitivity and specificity exceeding 85% in some studies. Similarly, the A β 42/A β 40 ratio has demonstrated reliable predictive value for amyloid pathology.

Neurofilament light chain has proven useful for monitoring disease progression and neuronal damage.

Discussion

The development of blood biomarkers represents a major advancement in the diagnosis of neurodegenerative diseases. Compared with traditional diagnostic methods, blood tests offer several advantages including lower cost, minimal invasiveness, and easier accessibility.

These characteristics make blood biomarkers suitable for large-scale screening programs and repeated monitoring of disease progression.

However, several challenges remain before blood biomarkers can be fully integrated into routine clinical practice. Standardization of laboratory methods, validation across diverse populations, and large longitudinal studies are necessary to confirm their reliability.

Future research should also focus on combining multiple biomarkers with neuroimaging and artificial intelligence-based diagnostic models to improve diagnostic accuracy.

Future Perspectives

Advances in molecular biology and diagnostic technologies are likely to further improve the accuracy of blood biomarker testing. Integration of biomarker analysis with genetic testing and machine learning algorithms may allow earlier detection of neurodegenerative processes.

Such approaches could transform the clinical management of Alzheimer's Disease and enable more effective therapeutic interventions.

Conclusion

Alzheimer's Disease remains one of the most significant neurological disorders affecting the aging population. Early diagnosis is essential for effective treatment and improved patient outcomes.

Blood-based biomarkers such as amyloid beta, phosphorylated tau proteins, and neurofilament light chain have demonstrated considerable potential as accessible and reliable diagnostic tools. Continued research and technological innovation are expected to further enhance their role in clinical practice.

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