

Application of Artificial Intelligence in the Diagnosis of Neurodegenerative Diseases: The Case of Alzheimer's Disease

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Abstract. In the arena of Alzheimer's Disease (AD) research, the utilization of Artificial Intelligence (AI) for the early diagnosis and prediction of the disease is identified as a crucial avenue of exploration. The impetus for this line of inquiry is rooted in the urgent need for treatments and strategies that can slow the progression of AD, particularly through early detection and prognostication. The application of AI, in conjunction with big data, facilitates the integration of diverse datasets related to AD and actual clinical cases. This approach is instrumental in identifying genes associated with AD, thereby uncovering the disease's biological underpinnings and potentially leading to the development of novel therapeutic modalities. Such advancements promise not only to reduce healthcare costs but also to alleviate the emotional burden on families affected by this condition. The primary research methodology of this paper is an extensive review of existing literature, focusing on the evolution, challenges, and future prospects of AI in the early diagnosis and prediction of AD. Research to date has demonstrated that various teams have proposed a multitude of models, each with its unique strengths, showcasing significant progress in the application of Al within this field. The findings reveal that while Al's application in the early diagnosis and prediction of AD has made commendable strides, the models employed still offer considerable room for improvement. Moreover, several challenges remain unresolved. Hence, the current body of research not only highlights AI's contributions to AD research but also underscores the necessity for further investigation and refinement in this vital area. In conclusion, this review emphasizes the developments achieved in the application of AI for the diagnosis and prediction of AD, while also identifying areas for potential enhancement. The significance of this study lies in its detailed depiction of the current landscape of AI in AD research, accentuating the importance of continued exploration and optimization in combating this formidable disease. Ultimately, this research seeks to forge more effective strategies against AD, underscoring the potential of AI as a powerful tool in understanding and addressing this debilitating condition.

Keywords: Artificial intelligence; Diagnosing Alzheimer's disease; Diagnostic methods.

1. Introduction

As the global population ages, the challenge of diagnosing and treating neurodegenerative diseases, particularly Alzheimer's Disease (AD), has escalated in importance. The impact of AD extends significantly beyond the patients, placing a considerable strain on both families and healthcare systems globally. Given the scarcity of effective treatments and the limited number of medications that might slow the disease's progression in its early stages, emphasizing early diagnosis and prediction of AD has become critical. This not only aims to reduce healthcare costs but also to alleviate the emotional toll on the families of those affected.

In recent advancements, Artificial Intelligence (AI) has revolutionized the medical field, especially in enhancing the early diagnosis of neurodegenerative diseases. AI's application has markedly improved diagnostic accuracy and expanded the possibilities for early detection. This study focuses on summarizing prior research, aiming to furnish readers with a detailed overview of the current state and development of AI in the early diagnosis and prediction of AD. It highlights the integration of AI with traditional medical methods, such as amyloid PET imaging, electroencephalography (EEG), and magnetic resonance imaging (MRI), underscoring AI's unique benefits and potential synergy with

established practices. Alongside, it subtly suggests the exploration of AI and big data as a frontier for uncovering AD's genetic markers and biological mechanisms, marking a vast and uncharted territory for future investigation.

By selecting and examining several pioneering models for AD's early prediction and diagnosis, this paper illuminates their innovations and emphasizes the critical role of AI in devising more effective AD management and treatment strategies. As AD continues to pose a significant challenge with the aging population, this research underscores the indispensable role of AI in advancing early diagnosis and prediction techniques for AD. Through an exhaustive review of current applications and the introduction of innovative predictive and diagnostic models, this study aspires to pave the way for enhanced strategies in AD management and treatment, providing a comprehensive and current perspective on AI's potential in addressing this debilitating disease.

2. Early Diagnosis And Prediction Of AD

2.1. Application Status of Early Diagnosis and Prediction of AI

In the realm of neuroimaging for Alzheimer's disease (AD) diagnosis and progression, recent advancements have leveraged artificial intelligence (AI) to significantly enhance the accuracy and efficiency of interpreting complex imaging data. Convolutional Neural Networks (CNNs), for instance, have been pivotal in categorizing images by identifying and mapping a vast array of features, leading to the use of MRI and PET images for predicting AD diagnoses and studying cognitive aging. These approaches often integrate clinical readouts, such as biomarker information and assessments of motor or cognitive performance, to improve specificity. Similarly, Support Vector Machines (SVMs) have analyzed MRI data, sometimes combining structural and functional MRI with cognitive assessment data, to refine disease diagnosis. This includes differentiating structural MR scans of individuals across various severities of AD and cognitively normal elderly individuals, predicting conversion from mild cognitive impairment (MCI) to AD with greater accuracy than traditional methods, and identifying novel brain regions of interest. Furthermore, the application of machine learning algorithms, like random forests, to CT images has demonstrated comparable performance to radiologist-labeled MR images in detecting white matter lesions, showcasing the potential of AI to extend diagnostic capabilities across neuroimaging techniques [1].

Transitioning to the domain of motor dysfunction associated with neurodegenerative disorders, AI has introduced innovative methodologies for assessing and predicting disease progression. Machine learning techniques have been adeptly applied to analyze motor performance in tasks as nuanced as drawing and handwriting, which is particularly useful in the early diagnosis of Parkinson's disease (PD). Such analyses have moved beyond simple observational assessments, utilizing classifier-based supervised machine learning algorithms to differentiate between normal and abnormal hand movements. This approach has proven effective in identifying PD-specific irregularities, with metrics related to the velocity and spatiotemporal trace of movement aiding in the distinction between affected individuals and healthy controls. Additionally, AI-based hardware, such as the Parkinson's KinetiGraph and the Kinesia system, have been introduced to automatically score motor functions, providing valuable data for further machine learning analysis [1].

The exploration of language features through artificial intelligence (AI) has unveiled significant insights into cognitive states, especially in the context of neurodegenerative diseases like Alzheimer's disease (AD). Machine learning algorithms have been employed to extract and analyze language features from audio recording transcripts, enabling the distinction between individuals with AD and healthy controls. Studies have utilized algorithms such as Support Vector Machines (SVMs) to analyze verbal utterances, where the lexical features derived from patient speech effectively differentiate between AD, mild cognitive impairment (MCI), and healthy states. Additionally, n-gram language models have assessed the complexity of patient speech, correlating higher perplexity scores with AD diagnosis. Beyond text analysis, AI-driven interactive avatars have captured more nuanced

language data, using speech features and audiovisual cues to classify cognitive health. These avatars allow for a more natural and extended interaction than traditional clinical assessments, enhancing the detection of subtle speech alterations indicative of neurodegenerative decline [1-4].

The integration of artificial intelligence (AI) within the study of molecular and genetic data has catalyzed a transformative approach to understanding and diagnosing Alzheimer's disease (AD). Leveraging next-generation sequencing techniques, machine learning algorithms have been pivotal in navigating the vast volumes of genomic data, identifying AD-associated genes, and uncovering complex genetic interactions that contribute to the disease's onset and progression. Notably, Support Vector Machines (SVMs) have been employed to sift through brain-specific gene expression data, facilitating the identification of novel AD-associated genes and pathways by comparing known AD-associated genes with newly analyzed data. This approach has led to the discovery of genes involved in critical cellular processes previously unassociated with AD. Furthermore, the application of AI in analyzing gene expression profiles has enhanced the accuracy of distinguishing individuals with AD from healthy controls, demonstrating the potential of machine learning to predict disease phenotype based on genetic and environmental interactions. The use of AI in molecular and genetic research not only accelerates the identification of biomarkers for early diagnosis and therapeutic targeting but also opens new avenues for personalized medicine in neurodegenerative diseases [1-4].

The application of artificial intelligence (AI) to clinical records has significantly advanced the field of healthcare, particularly in the early detection and management of Alzheimer's disease (AD). Machine learning and natural language processing techniques are instrumental in mining the vast and often unstructured data contained within Electronic Health Records (EHRs), transforming them into a rich source of actionable medical insights. By employing algorithms capable of understanding complex human language, AI has enabled the extraction of critical information from patient histories, symptoms, and treatment outcomes, facilitating a more nuanced understanding of AD progression. This approach has led to the development of predictive models that leverage longitudinal EHR data to forecast disease trajectories, offering personalized health forecasts for patients. Additionally, deep learning methods have been applied to analyze these large datasets, predicting clinical events and improving diagnostic accuracy with remarkable success [4].

2.2. History of Early Diagnosis and Prediction of AD

The journey towards early diagnosis and prediction of Alzheimer's Disease (AD) has been marked by significant advancements across various domains of medical science. This progress reflects an evolving understanding of AD's complex pathophysiology and the increasing integration of technological innovations in healthcare.

Initially, the diagnosis of AD relied heavily on clinical observations and the patient's history, with a definitive diagnosis often only possible post-mortem through the examination of brain tissue. The introduction of the Mini-Mental State Examination (MMSE) in 1975 provided a standardized method to assess cognitive impairment, representing a significant step forward in the clinical evaluation of patients with suspected AD.

The development and refinement of biomarkers for AD have been pivotal in advancing early diagnosis and prediction. Biomarkers in cerebrospinal fluid (CSF), such as amyloid-beta ($A\beta$) and tau proteins, have been extensively studied since the early 2000s. These biomarkers have enabled the identification of AD pathology years before the onset of clinical symptoms. The AD-T-N-X framework, introduced in 2018, categorized these biomarkers based on amyloid deposition (A), pathologic tau (T), neurodegeneration (N), and other factors (X), providing a more nuanced understanding of the disease's progression [5].

Imaging technologies, particularly magnetic resonance imaging (MRI) and positron emission tomography (PET), have significantly enhanced the ability to detect AD-related changes in the brain. MRI has been used to observe structural changes, such as atrophy in specific brain regions like the hippocampus. PET imaging, using tracers for $A\beta$ and tau, has allowed for the visualization of these

proteins' accumulation in the brain, offering insights into the disease's pathophysiological processes [6].

The rise of digital biomarkers and the use of artificial intelligence (AI) in analyzing complex data from imaging, genetic, and clinical sources represent the frontier of AD research. These technologies hold promise for identifying individuals at risk of AD even earlier and with greater precision, by detecting subtle changes in motor functions, eye movements, olfactory abilities, and sleep patterns that may precede cognitive decline [4, 7].

Moreover, blood-based biomarkers for AD, such as p-tau217 and p-tau181, have emerged as a less invasive alternative to CSF sampling, facilitating easier and more accessible screening for AD pathology in the broader population.

2.3. Comparison of Common Models

Fan Li, Manhua Liu, and the Alzheimer's Disease Neuroimaging Initiative proposed a novel Alzheimer's Disease (AD) diagnosis method using MRI brain images, utilizing multiple cluster Dense Convolutional Networks (DenseNets). This method diverges from traditional approaches by partitioning the brain image into $3 \times 3 \times 3$ regions, from which 3D patches are extracted and then grouped via K-means clustering. For each cluster, a DenseNet is trained to learn patch-level features, which are aggregated to represent local brain areas. These aggregated features from different regions are then combined for final AD classification [8].

The method offers practical solutions to common challenges in AD diagnosis, such as the small size of image datasets and the complexities of manual feature extraction. By focusing on clusters of local image patches for DenseNet training, the need for large datasets is circumvented, and the process is simplified by removing the requirements for tissue segmentation, ROI definition, and rigid registration. However, optimizing DenseNet parameters and interpreting learned features in a clinical context remain as challenges. The approach suggests prioritizing clusters with higher classification accuracies to identify relevant disease regions, streamlining the diagnostic process and enhancing understanding of AD's impact on the brain [8].

The study by Shangran Qiu, Matthew I. Miller, Prajakta S. Joshi, and colleagues presents a deep learning framework for Alzheimer's disease dementia assessment, leveraging a multimodal approach to classify subjects into categories of normal cognition (NC), mild cognitive impairment (MCI), Alzheimer's disease (AD), and non-AD dementias (nADD). This framework distinguishes itself by utilizing a wide range of routinely collected clinical data, including demographics, medical history, neuropsychological testing, neuroimaging, and functional assessments [9].

The core of their method involves the development and validation of models capable of processing both MRI and non-imaging data to perform multiple diagnostic tasks. Specifically, they created three distinct models: an MRI-only model that processes neuroimaging data through a convolutional neural network (CNN); a non-imaging model that uses traditional machine learning to analyze scalar clinical variables; and a fusion model that combines the MRI-derived data with clinical variables for enhanced diagnostic performance [9].

One of the notable achievements of this study is the models' ability to match or even exceed the diagnostic accuracy of practicing neurologists and neuroradiologists, particularly with the fusion model. The application of interpretability methods like SHapley Additive exPlanations (SHAP) enabled the identification of disease-specific patterns in the brain, aligning closely with neuropathological findings on autopsy. This aspect underscores the models' potential in not just achieving high accuracy but also providing insights into the neuroanatomical underpinnings of cognitive decline and dementia [9].

The research conducted by Mehmood et al. explores Alzheimer's Disease (AD) detection in magnetic resonance images during its initial stages through the identification of mild cognitive impairment (MCI) using structured deep learning. They employed the Visual Geometry Group architecture, a

deep convolutional neural network, analyzing FMRI images from the Alzheimer's Disease Neuroimaging Initiative (ADNI) database. This study, without data augmentation, achieved a notable accuracy of 98.73% by classifying 300 MRI subjects into Alzheimer's, late mild cognitive, and initial mild cognitive periods using a CNN with multiple layers including convolution, pooling, and softmax layers [9].

Odusami et al. introduced a deep learning method to identify the early stages of AD using a modified ResNet18 model for feature extraction from MRI data. This approach, leveraging data from ADNI, utilized a residual network with 18 layers and achieved an impressive accuracy of 99.09% across various cognitive categories, indicating the model's effectiveness in distinguishing between normal, mildly cognitively impaired, and AD-affected individuals [8].

Venugopalan et al. focused on the hippocampus area using a novel 3D CNN method to analyze MRI scans, aiming to remove noise and evoke data properties. By examining a significant volume of MRI images along with neuropsychological assessments, they reported an accuracy of 78%, demonstrating the utility of deep learning in enhancing the detection of cognitive impairment [8].

Pradhan et al. used the VGG19 and DenseNet169 architectures for classifying different stages of AD, with data sourced from an online library. This approach emphasized the strength of deep learning models in processing neuroimaging data, achieving an accuracy of 94% and showcasing the potential for AI to significantly contribute to the nuanced diagnosis of AD [8].

Shah et al. employed hard and soft voting algorithms alongside decision trees and support vector machines (SVM) for classifying early AD stages. Their method, tested on a cohort of patients, demonstrated an accuracy of 84%, underscoring the value of ensemble learning techniques in improving diagnostic precision [8].

Huanhuan et al. proposed using Convolutional Networks (ConvNets) for early dementia detection, classifying MRI images based on color variations within brain scans. By addressing overfitting through the inclusion of a dropout layer in their model, they achieved accuracies ranging from 97.65% to 88.37% for different stages of cognitive impairment [8].

Razavi et al. explored unsupervised feature learning to distinguish between healthy and AD-affected individuals, achieving a high accuracy of 98.3% with the softmax regression method. This study highlighted the effectiveness of machine learning in extracting meaningful patterns from neuroimaging data for AD diagnosis [8].

Islam et al. focused on utilizing deep learning CNNs to analyze MRI images for identifying different stages of AD. Their work, particularly effective with imbalanced datasets, reported precision rates of 0.81 and 0.82 for Inception-v4 and ResNet models, respectively, demonstrating deep learning's capacity for detailed neuroimaging analysis [8].

Through these diverse methodologies and models, the researchers have collectively advanced the field of AD diagnosis, illustrating the profound impact of deep learning and machine learning technologies in identifying and classifying neurodegenerative diseases at their early stages.

The methodologies and models used in the studies described showcase a broad spectrum of approaches toward the early diagnosis and prediction of Alzheimer's Disease (AD), employing deep learning and machine learning techniques. A comparison of these models, particularly focusing on their accuracy, reveals a significant range in effectiveness, with some models achieving high accuracies close to 99.09% and others achieving lower accuracies around 78%. These variations in accuracy can be attributed to the complexity of the task at hand, the nature of the data sets used, and the specific features and architecture of each model.

For instance, the modified ResNet18 model used by Odusami et al. and the structured deep learning approach by Mehmood et al. achieved remarkably high accuracies of 99.09% and 98.73%, respectively. These models benefitted from the depth and sophistication of CNN architectures, enabling detailed feature extraction from neuroimaging data. On the other hand, Venugopalan et al.'s

novel 3D CNN method, which focused on noise removal and feature extraction specifically from the hippocampus area, reported a lower accuracy of 78%, possibly due to the challenges associated with focusing on a specific brain region and the complexity of extracting and interpreting relevant features from 3D data [8].

A commonality among these studies is their reliance on various algorithms to explore AD's early diagnosis and prediction, underlining the significant research value of different algorithms in this field. The diversity in methodologies—from multi-layer CNNs and DenseNets to fusion models combining MRI-derived data with clinical variables—emphasizes the potential of a wide range of computational approaches to contribute valuable insights into the early detection of AD.

Moreover, the datasets used across these studies vary significantly, with some based on neuroimaging data such as MRI and PET scans, while others incorporate clinical data, including demographics, medical history, and neuropsychological assessments. This variation in data sources enriches the research landscape, allowing for the exploration of AD from multiple angles. However, it also presents challenges in terms of data heterogeneity, requiring sophisticated preprocessing and analysis methods to ensure the reliability and comparability of findings.

3. Discussion

Navigating the complexities of Alzheimer's Disease (AD) diagnosis through Artificial Intelligence (AI) confronts several formidable challenges, primarily rooted in the nuanced pathology of AD and its symptomatic overlap with non-Alzheimer's dementia (nADD) syndromes. This overlap complicates the differentiation process, as current AI models may not accurately distinguish between AD and other forms of dementia, including vascular dementia, Lewy body dementia, and frontotemporal dementia. The challenge is further amplified in cases of mixed dementia, where AI models might default to an AD diagnosis, overlooking the multifaceted nature of a patient's condition [7].

Another significant hurdle is the identification of Mild Cognitive Impairment (MCI), a condition that often precedes AD. The subtlety of early AD symptoms, which can mimic normal aging, makes it particularly challenging for AI models to discern the early indicators of MCI from the cognitive changes associated with aging. This difficulty underscores the necessity for more sophisticated AI models that can navigate the fine distinctions between normal aging, MCI, and early-stage AD [7].

To overcome these challenges, future research directions are poised to adopt a multimodal approach, integrating diverse data types such as neuroimaging (MRI, PET scans), genetic profiles, blood biochemical markers, and cognitive test results. This holistic approach aims to harness the complementary strengths of various data sources, improving the accuracy of AD prediction and diagnosis. By leveraging a broader spectrum of biomarkers and refining algorithms to detect AD risk prior to the onset of clinical symptoms, AI has the potential to facilitate earlier interventions [4, 7].

Moreover, AI's role in tailoring personalized treatment strategies represents a frontier in AD research. By analyzing a patient's genetic background, family history, and specific clinical profile, AI models can inform more customized and effective treatment plans. This individualized approach not only promises to enhance the quality of care for patients with AD but also opens new avenues for preventive strategies against the disease.

4. Conclusion

This paper delves into the significant role of Artificial Intelligence (AI) in the early diagnosis and prediction of Alzheimer's Disease (AD), illuminating the advances made and the challenges faced in this evolving field. AI's potential in neuroimaging, genetic analysis, and clinical data processing marks a promising avenue for overcoming the current limitations in AD diagnosis, particularly in differentiating it from other forms of dementia and detecting Mild Cognitive Impairment (MCI) at its nascent stage. Despite AI's advancements, the differentiation between AD and non-AD dementia

(nADD) remains a significant challenge, given the symptomatic overlap among neurodegenerative diseases. Furthermore, the subtle early signs of MCI, indicative of AD's onset, necessitate AI models that can discern these from the natural aging process. These challenges underscore the need for models that not only achieve high diagnostic accuracy but also offer interpretability and integration into clinical workflows without disruption. Looking ahead, the future of AI in AD diagnosis appears to be heading towards the integration of multimodal data sources, including neuroimaging, genetic markers, and clinical assessments. This approach aims to enhance the accuracy of AD predictions, allowing for earlier interventions. Moreover, the combination of AI with traditional medical methodologies offers a comprehensive strategy for personalized patient care, promising a significant impact on managing and understanding AD. In conclusion, AI stands at the forefront of revolutionizing AD diagnosis and care, offering new horizons for early detection and personalized treatment strategies. While challenges remain, particularly in model interpretability and data integration, the continued exploration and refinement of AI technologies hold the promise of transforming the landscape of AD diagnosis, paving the way for more effective management and treatment of Alzheimer's Disease within the medical field.

Authors Contribution

All the authors contributed equally and their names were listed in alphabetical order.

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