

Bridging the gap from scientific progress to system readiness in Alzheimer's disease (AD)

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During the AD/PD™ (Alzheimer's and Parkinson's disease) Conference in March 2026, a consistent theme emerged across scientific and industry discussions: while progress in understanding neurodegenerative diseases (NDDs) has accelerated, the field is converging on the view that these diseases are biologically heterogeneous, with different progression trajectories, symptomatology and lived experiences. Despite significant scientific progress and unprecedented industry investment, advances in NDD research continue to reveal a level of complexity that cannot be addressed by single or homogenous treatment approaches.

Recent large, well-executed trials that did not achieve their primary endpoints underscore the fact that heterogeneity in disease biology, symptomatology and co-pathology has been challenging to account for in both trial design and clinical strategy. At the same time, even positive studies, such as Eisai's CLARITY-AD, have demonstrated that while clinical benefit is achievable, effect sizes remain modest and dependent on careful patient selection. Looking ahead, ongoing studies targeting preclinical populations, such as AHEAD 3-45, highlight a move towards earlier intervention, while introducing additional complexity in identifying, stratifying and managing patients long before overt symptoms emerge. Together, these trials reinforce the need for more precise patient

characterisation and nuanced approaches to development. They also highlight a broader challenge: even as the field progresses, translating scientific advances into meaningful outcomes will require a deeper understanding of how these diseases are experienced and managed in real-world settings, not only by health systems but also by patients and their families.

From the patient and family perspective, the lived experience and understanding of disease progression, expectations around symptom management and attitudes toward potential for disease modification are not fully understood. From the HCP perspective, while specialist neurologists may be closely aligned with the evolving science, we are far removed from a world where a primary care workforce is fully equipped to adopt and implement new diagnostic and therapeutic approaches. At the same time, both provider infrastructure and payer models risk being insufficiently prepared to absorb the demands associated with successful product launches.

Pharma companies hoping to build a market presence in AD must think beyond siloed approaches where a clinical endpoint is the only true north, towards integrated, precise, patient- and system-relevant models, facilitating seamless progress from development into care products and service solutions.

WE SUGGEST THREE KEY THEMES FOR PHARMA STRATEGISTS SEEKING TO ACHIEVE MARKET LEADERSHIP IN AD

1. Driving harder to integrate development and commercial strategy

- Market success in AD (and PD) will require more integrated thinking across traditionally siloed functions. Clinical development has often been narrowly anchored to legacy endpoints and measures that limit the ability to capture the full complexity of disease progression and treatment impact. Increasing investment in digital assessment tools, including cognition, voice and other digital biomarkers, presents an opportunity to bridge this gap, supporting screening, patient stratification and the generation of data that extend beyond the clinical trial and into real-world settings.
- Moving forward, companies must better align development, evidence generation, commercial strategy and real-world data into a cohesive framework that represents true disease trajectories and the lived experience of patients, families and HCPs.



- This requires shifting from endpoint optimisation to holistic disease understanding, ensuring that clinical evidence meaningfully translates into practice.

2. Building ecosystem partnerships to enable end-to-end care

- No single organisation will be able to address the full complexity of NDD management. To support mainstream healthcare providers, more integrated partnerships across diagnostics, digital health, care delivery and patient support services will be critical to serve the full ecosystem.
- Pharma companies can, and likely must, have a role to play here. They should take a proactive approach to shaping ecosystem design, rather than retrofitting solutions to achieve authorisation, by developing integrated service models and care pathways that align with the needs of patients, providers and payers.
- Early investment in these capabilities, including through late-stage trials, will be critical to ensure scalable and sustainable deployment.

3. Planning market-led investments early to facilitate adoption at scale

- Companies must complement science-led investment with market-led planning,

grounded in a comprehensive understanding of patient populations, healthcare system dynamics and market variations. As part of its symposium, the Davos Alzheimer's Collaborative highlighted the need to understand how different global healthcare systems will evolve their approach to diagnostics, allowing companies to bridge the gap between scientific readiness and real-world deployment.

- The US remains the largest target market and has led the way in early reimbursement and adoption of the first wave of disease-modifying therapies from Lilly and Biogen. In contrast, there is considerable scepticism regarding Europe's more centralised payer/provider systems' ability or appetite to support adoption. Markets such as China and Japan, driven by demographic trends and evolving healthcare system dynamics, may prove attractive. In parallel, following the recent paradigm-shifting examples seen in weight management, innovatively targeting private/out-of-pocket/direct-to-consumer models merits early strategic consideration.
- Developing clear market access strategies, care pathway blueprints and healthcare system archetypes early in the lifecycle will be essential to ensure that therapies and diagnostics are effectively adopted.

Final Thought

Healthcare systems today remain unprepared for the widespread adoption of disease-modifying therapies and emerging diagnostics in AD and PD. Addressing this gap will require coordinated action across development, partnerships and market strategy. Those that begin to align these elements early will be best positioned to support health systems in delivering the next generation of neurodegenerative care.

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At **Lucid Strategy Consulting**, we combine strategic insight with deep life sciences expertise to deliver impact for our clients. We help leaders unlock their assets' full potential, transform their functions across development & commercial, and create new value for their customers and patients.

The challenges outlined in this paper – of fragmented healthcare systems, immature diagnostic infrastructure, and the need to shift the treatment paradigm from managing decline to pre-symptomatic intervention – are not challenges that any single organisation can solve in isolation. They are examples of how healthcare ecosystems, pharma and diagnostic medtech companies can and must find new ways to collaborate.

Lucid Strategy Consulting brings deep scientific, strategic, operational and commercial expertise and an innovation mindset to help leadership teams navigate the optimal path through complexity. Central to our approach is what we call 'Step 0', a comprehensive, cross-disciplinary, outside-in assessment of the forces that will determine whether an asset will succeed, conducted before asset or brand strategy begins. The output of Step 0 is the 'Lucid Truth': the governing insights that explain why an ecosystem behaves the way it does and anchor every downstream strategic and commercial decision.

Our capabilities span the full arc from ecosystem diagnosis to strategic execution across the following areas:

Ecosystem diagnosis and strategic foundation (Step 0)

- Multi-dimensional ecosystem mapping across clinical, behavioral, operational, economic and societal dimensions
- Identification of the governing barriers to adoption, both behaviour-driven and structural
- Ongoing ecosystem monitoring, assumption testing and strategy refinement as development and commercialisation progress

Go-to-market strategy and launch readiness

- Launch ecosystem readiness assessment and gap analysis
- Go-to-market model design across market archetypes
- Cross-functional launch alignment and sequencing

Clinical programme strategy

- Endpoint research and analysis, efficacy benchmarking and Target Product Profile development, informed by ecosystem realities and real-world adoption requirements

- Clinical programme strategy including clinical trial design, timelines, risks/mitigations, competitor landscape, estimated costs and business case
- Scientific and clinical KOL advisory boards

Measurement and digital endpoints

- Digital measurement strategy, conceptual model and definition of measurement concepts of interest
- Measurement technology landscape, partner identification and development
- Digital biomarker development planning and integration into clinical trials (experience design)

Portfolio strategy and digital innovation and evaluation

- Overall disease and therapeutic area strategy
- Opportunity analysis, prioritisation and decision support across individual assets
- Digital innovation strategy for screening, diagnosis and disease progression measurement
- Investment and business case development

Diversity strategy, framework and capability

- Enterprise approach and strategy (including maturity assessment) for trial diversity
- Framework and operating model for diversity action planning (FDA, MHRA)
- Site and patient engagement optimisation around diversity

Real-world evidence, patient experience mapping and insights

- Integrated ecosystem diagnosis and ongoing strategic decision-making
- Study experience mapping
- Innovation/intervention opportunity identification
- Primary/secondary patient insights research
- Real-world evidence/epidemiology analysis

Patient experience, recruitment and retention design, audit and optimisation

- Patient experience measurement framework, tool and infrastructure
- Patient experience and recruitment, and retention tactics design
- Recruitment and retention tactical audit and optimisation

