A common form of Mixed Dementia (MD) is coexistence with Alzheimer’s Disease (AD) and Vascular Dementia (VD). MD is heterogeneous and therefore challenging to distinguish from AD and VD. Common treatments are necessary to intervene rapidly. Cerebral small vessel disease (SVD) is a major contributor to vascular and Alzheimer’s dementia. Moreover, blood-brain barrier (BBB) failure, which is the primary cause of SVD, may be an independent risk factor for early cognitive decline in elderly population. Endothelial cell dysfunction (ECD) is an early feature of AD and VD. Therefore, targeting ECD can provide a therapeutic strategy to reverse SVD, which may benefit early AD, VD, and MD patients. A randomized, double-blinded, interventional study was designed to evaluate ECD reversal therapy in AD, VD, or MD patients. In this 2-years longitudinal study, we followed 112 participants (AD_treated, AD_placebo, VD_treated, VD_placebo, MD_treated, MD_placebo, healthy_controls, N=16 each). The primary measure was the change from baseline to 2y in scores on the 11-item cognitive subscale of the AD Assessment Scale (ADAS-cog11). Other measures: biosample (AB and Tau), and imaging (MRI atrophy rates, Amyloid PET). These results were obtained (significance level=0.05):

AD_placebo vs. treated:
ADAS-cog11: non-significant reduction (NSR);
Biosample: NSR;
Atrophy: significant reduction (SR);
PET: NSR
VD_placebo vs. treated:
ADAS-cog11: SR;
Biosample: SR;
Atrophy: SR;
PET: NSR
MD_placebo vs. treated:
ADAS-cog11: SR;
Biosample: NSR;
Atrophy: SR;
PET: NSR
ECD reversal may be a promising alternative therapy for dementia with vascular pathology. A combination therapy (with other therapeutic targets) may provide benefits to patients with Alzheimer’s pathology.

Themes:

Check (highlight) the most applicable theme according to the abstract.

<table>
<thead>
<tr>
<th>Innovation and Technology</th>
<th>Health and Wellness</th>
<th>Culture and Society</th>
<th>Sustainability and Conservation</th>
</tr>
</thead>
</table>

Comments:

There are many details included in the abstract that could be left in the presentation itself, such as the participant titles and the NSR/SR details. The abundance of extraneous details may be a confusing way to introduce your research. Additionally, you may wish to expand on the background information of AD, including its symptoms and affected population.