



Cognition Therapeutics Announces New Episode of “Conversations” Podcast: Insights for the Primary Care Physician: Recognizing Dementia with Lewy Bodies

March 27, 2023

PURCHASE, N.Y., March 27, 2023 (GLOBE NEWSWIRE) -- [Cognition Therapeutics, Inc.](https://www.cogrx.com) (Nasdaq: CGTX) (the “Company” or “Cognition”) has released its fourth “Conversations” video podcast, a two-part conversation about dementia with Lewy bodies (DLB) focusing on the overlapping symptoms and pathology of DLB, Alzheimer's and Parkinson's diseases. Four neuroscience thought leaders with a wealth of experience in diagnosing and managing dementia share their insights into the nuanced symptoms and signs that help them differentiate DLB from other dementias such as Alzheimer's disease.

[Episode 4](#): “Insights for the Primary Care Physician: Recognizing Dementia with Lewy Bodies” features a conversation between:

- Brendan Kelley, M.D., (moderator) vice chair for clinical operations at the Peter O'Donnell Jr. Brain Institute and a professor in the department of neurology at the University of Texas Southwestern Medical Center;
- Sarah B. Berman, M.D., Ph.D., associate professor in the departments of neurology and clinical & translational science at the University of Pittsburgh and director of DLB programs at the university's Alzheimer's Disease Research Center;
- James Leverenz, M.D., director of the Cleveland Clinic Lou Ruvo Center for Brain Health; and
- David Shprecher, D.O., the movement disorder director at Banner Sun Health Research Institute and a clinical associate professor at the University of Arizona

This twenty-five-minute conversation is presented in two primary sections:

- The intersection of Alzheimer's and DLB: epidemiology, symptoms and co-pathology
 - Core clinical features of DLB
 - Biomarkers for DLB
- Practical insights for community physicians
 - Frequency of missed or delayed diagnosis of DLB
 - Facets of patient-reported memory loss: changes in cognitive vs. executive function
 - Nuances of psychological symptoms: hallucinations, misperceptions, delusions and false beliefs
 - Medical and emotional importance of an accurate diagnosis

Cognition Therapeutics welcomes comments, questions and feedback on this and other Conversations episodes which may be submitted at conversations@cogrx.com. We'd love to hear your thoughts!

About Dementia with Lewy Bodies

An estimated 1.4 million Americans are living with DLB, a progressive disease that accounts for approximately 5-10% of all dementia cases. DLB, has overlapping pathology and symptomology of Parkinson's and Alzheimer's diseases, making it challenging to diagnose. DLB is caused by a build-up of a protein, α -synuclein, which forms deposits, called Lewy bodies, in the brain. Oligomers of α -synuclein are highly toxic and bind to neurons where they impair critical cellular processes, causing synaptic dysfunction and loss. Patients with DLB often experience cognitive, physical, sleep and behavioral symptoms, including hallucinations, delusions and mood changes. There are currently no disease-modifying treatments approved for DLB patients.

About the SHIMMER trial

Cognition is conducting the double-blind Phase 2 SHIMMER study (COG1201) in adults with dementia with Lewy bodies (DLB). The clinical trial is designed to enroll 120 individuals between 50 and 80 years of age, who will be randomized to receive a placebo or one of two daily oral doses of CT1812 for six months. In addition to safety, this study will compare changes in cognitive performance, physical activity, and pharmacokinetic and pharmacodynamic biomarkers to baseline measurements. To learn more about the SHIMMER study and site locations please visit www.shimmerDLBstudy.com.

The SHIMMER study is supported by \$30M in grants by the National Institutes of Health's National Institute on Aging (NIA).

About Cognition Therapeutics

Cognition Therapeutics, Inc. is a clinical-stage biopharmaceutical company engaged in the discovery and development of innovative, small molecule therapeutics targeting age-related degenerative disorders of the central nervous system and retina. We are currently investigating our lead candidate CT1812 in [clinical programs](#) in Alzheimer's disease, dementia with Lewy bodies (DLB) and dry age-related macular degeneration (dry AMD). We believe CT1812 and our pipeline of σ -2 receptor modulators can regulate pathways that are impaired in these diseases. We believe that targeting the σ -2 receptor with CT1812 represents a mechanism functionally distinct from other current approaches in clinical development for the treatment of degenerative diseases. More about Cognition Therapeutics and its [pipeline](#) can be found at <https://cogrx.com>

Health Care Disclaimer

Our podcast series does not constitute the practice of medical advice, diagnosis or treatment. Always talk to your health care provider for diagnosis and treatment, including your specific medical needs. If you have or suspect that you have a medical problem or condition, please contact a qualified health care professional immediately.

Forward-Looking Statements

This press release contains forward-looking statements within the meaning of The Private Securities Litigation Reform Act of 1995. All statements contained in this press release, other than statements of historical facts or statements that relate to present facts or current conditions, including but not limited to, statements regarding our product candidates, any expected or implied benefits or results, including that initial clinical results observed with respect to CT1812 will be replicated in later trials and our clinical development plans, including statements regarding our Phase 2 SHIMMER study of CT1812 and any analysis of the results therefrom, are forward-looking statements. These statements, including statements relating to the timing and expected results of our clinical trials, and cash runway, involve known and unknown risks, uncertainties and other important factors that may cause our actual results, performance, or achievements to be materially different from any future results, performance, or achievements expressed or implied by the forward-looking statements. In some cases, you can identify forward-looking statements by terms such as “may,” “might,” “will,” “should,” “expect,” “plan,” “aim,” “seek,” “anticipate,” “could,” “intend,” “target,” “project,” “contemplate,” “believe,” “estimate,” “predict,” “forecast,” “potential” or “continue” or the negative of these terms or other similar expressions. We have based these forward-looking statements largely on our current expectations and projections about future events and financial trends that we believe may affect our business, financial condition, and results of operations. These forward-looking statements speak only as of the date of this press release and are subject to a number of risks, uncertainties and assumptions, some of which cannot be predicted or quantified and some of which are beyond our control. Factors that may cause actual results to differ materially from current expectations include, but are not limited to: competition; our ability to secure new (and retain existing) grant funding; our ability to grow and manage growth, maintain relationships with suppliers and retain our management and key employees; our ability to successfully advance our current and future product candidates through development activities, preclinical studies and clinical trials and costs related thereto; uncertainties inherent in the results of preliminary data and pre-clinical studies being predictive of the results of clinical trials; the timing, scope and likelihood of regulatory filings and approvals, including regulatory approval of our product candidates; changes in applicable laws or regulations; the possibility that we may be adversely affected by other economic, business or competitive factors, including ongoing economic uncertainty; our estimates of expenses and profitability; the evolution of the markets in which we compete; our ability to implement our strategic initiatives and continue to innovate our existing products; our ability to defend our intellectual property; the impact of the ongoing COVID-19 pandemic on our business, supply chain and labor force; and the risks and uncertainties described in the “Risk Factors” section of our annual report filed with the Securities and Exchange Commission. These risks are not exhaustive and we face both known and unknown risks. You should not rely on these forward-looking statements as predictions of future events. The events and circumstances reflected in our forward-looking statements may not be achieved or occur, and actual results could differ materially from those projected in the forward-looking statements. Moreover, we operate in a dynamic industry and economy. New risk factors and uncertainties may emerge from time to time, and it is not possible for management to predict all risk factors and uncertainties that we may face. Except as required by applicable law, we do not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise.

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