#### How to Cite:

Almatrafi, A. S., Alotaibi, A. M., Almotairi, K. M., & Al-Mutairi, R. M. H. (2021). The evolving roles of nursing and emergency care in early detection of neurodegenerative diseases using biomarkers. Tennessee Research International of Social Sciences, 3(1), 66-85. https://doi.org/10.29332/triss.v3n1.83

## The evolving roles of nursing and emergency care in early detection of neurodegenerative diseases using biomarkers

Amer Saadi Almatrafi KSA, National Guard Health Affairs

### Adil Mubarak Alotaibi

KSA, National Guard Health Affairs

### Khaled Minawir Almotairi

KSA. National Guard Health Affairs

### Raud Mater Husayban Al-Mutairi

KSA, National Guard Health Affairs

Email: akk29337@gmail.com

**Abstract**---**Background**: Neurodegenerative diseases, including Alzheimer's, Parkinson's, and Huntington's, present a growing public health challenge due to their progressive nature and lack of curative treatments. Early detection using biomarkers, such as imaging, cerebrospinal fluid proteins, and blood-based markers, has emerged as a critical strategy to improve patient outcomes. Nurses and emergency care teams, as frontline healthcare providers, play vital roles in implementing early detection strategies. However, their contributions to leveraging biomarkers remain underexplored, particularly in acute and emergency settings where early signs often present. Aim: This paper examines the evolving roles of nurses and emergency care professionals in the early detection of neurodegenerative diseases through the utilization of biomarkers, highlighting their contributions to patient screening, education, and interdisciplinary care. Methods: A systematic literature review was conducted using databases including PubMed, CINAHL, and Google Scholar. Studies relevant to nursing and emergency care roles in biomarker utilization and neurodegenerative disease management were selected. Qualitative analysis identified current practices, barriers, and opportunities in this domain. Results: The findings

Tennessee Research International of Social Sciences © 2021. ISSN 2766-7464 (Online) Publisher: Smoky Mountain Publishing Manuscript submitted: 01 Jan 2021, Manuscript revised: 09 Jan 2021, Accepted for publication: 15 Jan 2021 66



indicate that nurse- and emergency-led biomarker screening programs significantly enhance early detection efforts. However, barriers such as insufficient training on biomarkers and limited access to advanced diagnostic tools were identified. Collaborative approaches and specialized training programs were shown to improve outcomes and expand the contributions of nursing and emergency teams. **Conclusion:** Nurses and emergency care professionals are integral to the early detection of neurodegenerative diseases through biomarker application. Enhancing education, resource access, and fostering interprofessional collaboration are essential for optimizing care. Future research should focus on developing standardized frameworks to support their roles in this evolving field.

*Keywords*---nursing roles, biomarkers, neurodegenerative diseases, early detection, Alzheimer's disease, Parkinson's disease, nursing and emergency interventions.

#### Introduction

Neurodegenerative diseases, which include disorders such as Alzheimer's, Parkinson's, and Huntington's, are a global health concern due to the fact that they are progressive in nature, have a complex etiology, and there are no treatments that can cure them. There is a gradual loss of neuronal structure and function that is characteristic of these disorders, which ultimately results in deficits in cognitive abilities, motor skills, and behavioral patterns. In order to lessen the impact of these diseases and improve the outcomes for patients, early detection is absolutely necessary. Biomarker-based diagnostics have emerged as a game-changing instrument in this endeavor. Biomarkers, which are defined as quantitative indicators of biological processes or disease states, provide chances that have never been seen previously for the detection of neurodegenerative disorders in their early stages, frequently before clinical symptoms appear. In the context of this shifting paradigm, nurses play a crucial part in bridging the gap between advances in diagnostic technology and care that is individualized to the patient [1].

There is no possible way to exaggerate the importance of early identification in the field of neurodegenerative diseases. A delayed diagnosis is linked to the rapid advancement of the disease, a reduction in the effectiveness of treatment, and significant costs on patients and their families in terms of their physical health, emotional well-being, and financial situation. In the process of diagnosing neurodegenerative illnesses during the preclinical phases, biomarkers, which include imaging-based approaches, proteins found in cerebrospinal fluid (CSF), and new blood-based assays, have shown a great deal of promise [2]. A number of theoretical frameworks, such as the Chronic Care Model, which places an emphasis on proactive and trans-disciplinary approaches to the management of chronic illnesses, are compatible with these techniques. Through the incorporation of biomarker screening into routine practice, the education of patients, and the facilitation of multidisciplinary collaboration, nurses, who are

vital parts of healthcare teams, are in a position that is ideally positioned to operationalize these frameworks.

Biomarkers are playing an increasingly important role in the therapy of neurodegenerative diseases, as evidenced by recent discoveries. Biomarkers that are based on blood, such as phosphorylated tau (p-tau) and neurofilament light chain (NfL), have seen significant advancements that have improved diagnostic accuracy while simultaneously reducing the invasiveness and expense of testing [3]. Neuroimaging techniques, like as positron emission tomography (PET) for amyloid and tau, continue to contribute to the improvement of our understanding of the development of disease [4]. Furthermore, algorithms that are driven by artificial intelligence (AI) now provide biomarker analysis, which enables interpretations of complicated information to be performed more quickly and with greater precision [5]. It is imperative that existing gaps in nursing education and clinical training be addressed in order to maximize the value of biomarker-based solutions. These developments, in conjunction with the changing roles of nurses, bring to light the vital need to address these gaps.

Despite these developments, there are still several obstacles to overcome in order to successfully use biomarker technology into normal practice. The widespread acceptance of healthcare is hampered by factors such as limited accessibility, high costs, and inequities in healthcare delivery. To add insult to injury, nursing programs frequently fail to place an adequate amount of emphasis on biomarkerbased diagnostics, which leaves a significant number of nurses unprepared to traverse this developing field. In order to address these issues, it is necessary to make a concentrated effort to improve nursing education, to encourage collaboration across disciplines, and to lobby for policy reforms that priorities equal access to modern diagnostic technologies.

Through the use of biomarkers, this paper investigates the significant part that nurses play in the early detection of neurodegenerative illnesses. Particular attention is paid to the contributions that nurses make to screening, patient education, and interdisciplinary care. In the following section, which follows this introduction, we will delve into the various types of biomarkers and their uses in the diagnosis process of neurodegenerative diseases. We will also provide a full overview of the clinical utility and limitations of these biomarkers. In the following part, nursing interventions are discussed, with a focus on presenting case studies and best practices that demonstrate the influence that nurse-led initiatives have had in early detection. In the final section, we address the gaps in our knowledge and propose solutions to improve nursing education and practice. We also provide recommendations that can be directly implemented to improve the quality of care. With the purpose of offering insights that may be used to improve clinical practice, policy formation, and future research, the purpose of this paper is to make a contribution to the expanding body of literature on nursing roles in the management of neurodegenerative diseases.

### Neurodegenerative Diseases and Biomarkers In the context of neurodegenerative diseases, an overview of biomarkers

Degeneration of neurons in the central nervous system is a characteristic feature of neurodegenerative disorders such as Alzheimer's disease (AD), Parkinson's disease (PD), and amyotrophic lateral sclerosis (ALS). These diseases are characterized by the gradual death of neurons. The significance of early detection and precise diagnosis cannot be overstated when it comes to reducing the burden of chronic diseases and implementing timely interventions. In the process of identifying and monitoring neurodegenerative illnesses, biomarkers, which are defined as quantitative indications of normal biological or pathological processes, have become a crucial tool. The different kinds of biomarkers that are used, the most current developments in biomarker technology, and the difficulties that are linked with them are discussed in this part.

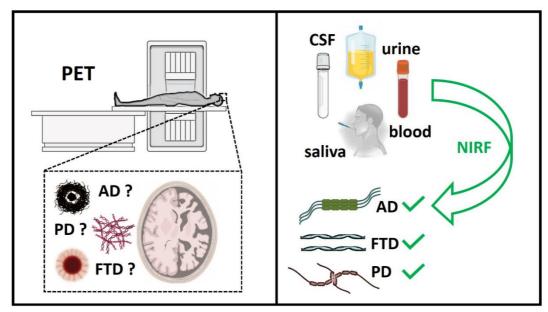


Figure 1: Early detection markers of neurodegenerative diseases

### **Biomarkers of Various Types**

Imaging biomarkers, cerebrospinal fluid (CSF) biomarkers, and blood-based biomarkers are the three primary types of biomarkers that are used in neurodegenerative illnesses. These biological indicators can be classified into broad categories. Each type offers a somewhat different perspective on the pathology and course of the disease.

### Biomarkers that are imaged

When it comes to visualizing structural, functional, and molecular changes in the brain, imaging biomarkers are dependent on neuroimaging techniques that are particularly advanced. Magnetic resonance imaging (MRI) and positron emission

tomography (PET) are two examples of techniques that have significantly contributed to the advancement of neurodegenerative disease diagnosis with technology. One example is the widespread use of amyloid and tau PET imaging, which is being employed for the purpose of identifying hallmark proteinopathies that are linked with Alzheimer's disease [6, 7].

Alzheimer's disease and other forms of dementia are characterized by a crucial characteristic known as brain atrophy, which can be detected by MRI. Certain patterns of atrophy, such as atrophy in the medial temporal lobe, have a substantial correlation with the course of the disease [8]. The functional magnetic resonance imaging (fMRI) and diffusion tensor imaging (DTI) techniques offer supplementary levels of information by mapping the activity of the brain and the integrity of the white matter, respectively.

### The Biomarkers Found in Cerebrospinal Fluid (CSF)

In the field of neurodegenerative illnesses, cerebrospinal fluid (CSF) biomarkers are among the most well-established diagnostic techniques. Direct evidence of biochemical alterations in the central nervous system can be obtained by the examination of proteins found in cerebrospinal fluid (CSF). There are three key biomarkers for Alzheimer's disease that have been validated for clinical application [9]. These biomarkers include amyloid-beta (A $\beta$ 42), total tau (t-tau), and phosphorylated tau (p-tau).

There is an accumulation of amyloid plaque in the brain, which is shown by decreased levels of  $A\beta 42$  in cerebrospinal fluid (CSF). On the other hand, elevated levels of t-tau and p-tau are indicative of neurodegeneration and tau pathology, respectively. It has been proven that these indicators have a high level of sensitivity and specificity when it comes to identifying Alzheimer's disease, even in the preclinical stages [10].

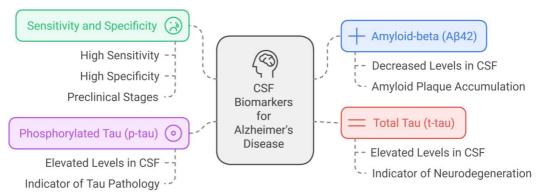


Figure 2: Shows the CSF Biomarkers for Alzheimer's Disease

### **Biomarkers Derived from Blood:**

Recent developments have brought blood-based biomarkers to the forefront as a potentially useful and less intrusive alternative to cerebrospinal fluid (CSF) biomarkers. Biomarkers found in the blood, such as plasma phosphorylated tau

(p-tau181, p-tau217), neurofilament light chain (NfL), and glial fibrillary acidic protein (GFAP), have demonstrated the potential to be used in the diagnosis of Alzheimer's disease and other neurodegenerative disorders [11, 12].

There is a high correlation between plasma p-tau indicators and amyloid and tau pathology, which mirrors the alterations that are detected in cerebrospinal fluid and PET imaging [13]. An elevated level of NfL, which is a marker of axonal injury, is observed in a number of neurodegenerative illnesses, including as amyotrophic lateral sclerosis (ALS) and frontotemporal dementia (FTD) [14]. Blood-based biomarkers are particularly helpful for large-scale screening due to the fact that they are both accessible and cost-effective.

### Blood-Based Biomarkers in Neurodegenerative Disease Diagnosis

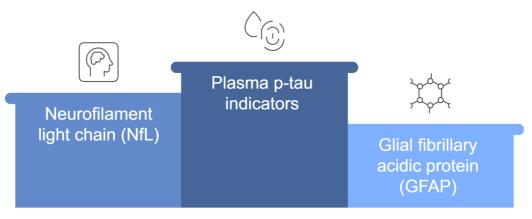


Figure 3: Shows the Blood-Based Biomarkers in Neurodegenerative Disease Diagnosis

# The most recent developments in the identification and applications of biomarkers

Because of the significant breakthroughs that have been made in biomarker research over the past ten years, diagnostic accuracy has been enhanced, accessibility has been increased, and the range of uses for biomarkers has been broadened.

### **Developments in Imaging Methods and Techniques**

PET imaging tracers have seen recent advancements that have improved their ability to identify tau pathology, which is an essential characteristic of Alzheimer's disease. As an illustration, new tracers such flortaucipir (18F-AV-1451), which have demonstrated enhanced specificity in recognising tau aggregates in vivo [15], have been demonstrated. Furthermore, the integration of machine learning algorithms with imaging data is becoming increasingly common in order to

improve diagnostic precision and recognise subtle patterns that are symptomatic of disease [16].

### The emergence of biomarkers based around blood

Diagnostics for neurodegenerative diseases have undergone a revolutionary change as a result of the shift towards blood-based biomarkers. Assays with a high level of sensitivity now make it possible to detect p-tau217 and other markers at low quantities, which helps to bridge the gap between clinical practice and research settings [17]. The value of blood biomarkers in monitoring the course of disease and evaluating the effectiveness of treatment has also been proven by longitudinal investigations [18].

Utilisation of Artificial Intelligence (AI) Methods that are driven by AI are becoming increasingly important in the field of biomarker research because they simplify the process of data processing and interpretation. As an illustration, deep learning algorithms have been developed for the purpose of analysing multimodal datasets. These algorithms combine imaging, cerebrospinal fluid, and blood biomarkers in order to enhance diagnosis accuracy [19]. Through the discovery of patterns in vast datasets that were not previously recognised, artificial intelligence also makes it easier to identify novel biomarkers.

### Technologies that focus on multiplex assays and omics

In the process of comprehending the intricate pathophysiology of neurodegenerative disorders, multiplex assays, which make use of the simultaneous measurement of numerous biomarkers, are becoming an increasingly effective instrument. Through the identification of new molecular signatures that are related with disease, proteomics, metabolomics, and transcriptomics have further broadened the landscape of biomarkers [20].

### **Utilisation of Biomarkers Presenting Difficulties**

In spite of the substantial progress that has been made, there are a number of obstacles that prevent the widespread implementation of biomarkers in clinical practice. These limitations include problems with accessibility and cost, as well as variations in the reliability and specificity of biomarkers.

### **Concerns Relating to Cost and Availability**

The high expense of biomarker testing is one of the most significant difficulties, particularly when it comes to imaging and cerebrospinal fluid (CSF) biomarkers. Imaging with positron emission tomography (PET) for amyloid and tau, for instance, is excessively expensive and sometimes unavailable to patients in settings with limited resources [21]. In a similar vein, lumbar punctures, which are necessary for cerebrospinal fluid (CSF) analysis, are intrusive, expensive, and involve the risk of complications, which reduces their appeal for routine clinical use [22].

The utilisation of blood-based biomarkers presents a more economical alternative; however, the application of these biomarkers is fraught with logistical problems, such as the requirement for specialised laboratory infrastructure and workers who have received training. The disparities that exist within healthcare systems further exacerbate these accessibility difficulties, as underserved communities frequently do not have access to advanced diagnostic technologies [23].

### There is a variability in the reliability and specificity of biomarkers

The diversity of biomarker performance across different populations and stages of disease is another significant restriction that must be taken into consideration. An example of this would be the fact that although amyloid PET imaging and CSF biomarkers are quite reliable in the diagnosis of Alzheimer's disease, their utility in distinguishing between disorders that overlap, such as vascular dementia and mixed pathologies, is still restricted [24].

Furthermore, the reliability of biomarkers can be affected by a variety of circumstances, including age, the presence of comorbidities, and changes in genetic makeup. For instance, because NfL levels are raised in a number of neurodegenerative disorders, it is difficult to differentiate between pathologies such as amyotrophic lateral sclerosis (ALS) and frontotemporal dementia (FTD) merely only on this marker [25]. The establishment of reference ranges for a variety of populations and the standardisation of biomarker assays are both crucial approaches to addressing these difficulties.

### Take into account both ethical and logistical factors

In addition, the utilisation of biomarkers gives rise to ethical concerns, particularly when it comes to the preclinical detection process. The identification of patients who are at risk for neurodegenerative illnesses prior to the development of symptoms presents hurdles to the patient in terms of obtaining their consent, the psychological burden, and the availability of preventative medicines [26]. In addition, the logistical complexity of incorporating biomarker testing into normal care, which takes into account the requirement for collaboration between primary care physicians and specialists, constitutes a substantial hurdle.

The diagnosis and treatment of neurodegenerative illnesses could be significantly improved with the use of biomarkers, which have enormous potential. Imaging, cerebrospinal fluid (CSF), and blood-based biomarkers each have their own set of benefits, and recent developments have made it possible to conduct diagnostics that are both more accessible and more accurate. On the other hand, in order to fully realise their potential, it is necessary to solve obstacles that are associated with cost, accessibility, and variability. By making investments in research, improving healthcare infrastructure, and encouraging collaboration across disciplines, it is possible to overcome the obstacles that stand in the way of the use of biomarkers. This will allow for early diagnosis of neurodegenerative illnesses and improved outcomes for individuals who suffer from these conditions.

### Identification and Observation of

The early detection of neurodegenerative disorders is a crucial part of the nursing profession, which places nurses at the forefront of patient care initiatives. The fact that they are easily accessible and have frequent interactions with patients puts them in a unique position to create screening programs that are based on biomarkers and to incorporate these tools into regularly scheduled clinical evaluations.

# In biomarker-based screening programs, nurse-led initiatives are being implemented

Initiatives conducted by nurses have proven to be quite helpful in aiding early diagnosis and timely therapies for neurodegenerative illnesses. It is common for nurses to be the initial point of contact for patients who appear with cognitive or motor symptoms. This gives nurses the ability to recognise early warning signals and initiate necessary referrals. Increasing the utilisation of biomarker-based diagnoses has been shown to be significantly successful through the implementation of programs that were planned and managed by nurses. For instance, nurse practitioners working in primary care settings have used cognitive screening tools and blood-based biomarker testing, which allow them to identify patients who are at risk for Alzheimer's disease and Parkinson's disease in their earliest stages [27].

In addition, specialised nurse-led clinics that prioritise the treatment of mobility disorders or dementia have incorporated biomarkers into their diagnosis algorithms. These clinics frequently make use of cutting-edge laboratory equipment, such as phosphorylated tau (p-tau) assays that are performed on blood samples or neuroimaging technology. When working in these types of environments, nurse practitioners are responsible for managing initial evaluations, coordinating laboratory tests, and interpreting results in conjunction with neurologists. Studies have demonstrated that initiatives of this kind not only improve diagnosis accuracy but also increase patient satisfaction by delivering care that is both timely and comprehensive [28].

### Utilization of Biomarkers in the Course of Routine Evaluations

Early detection tactics have undergone a paradigm shift as a result of the integration of biomarkers into normal nursing assessments. The incorporation of biomarker testing into conventional protocols for yearly health check-ups or focused screenings for high-risk populations is a task that nurses are in a position to successfully do. Within the context of wellness visits, for instance, geriatric nurses frequently evaluate elderly patients for signs of cognitive deterioration. The incorporation of biomarker evaluations, such as plasma neurofilament light chain (NfL) or p-tau tests, into these assessments has the potential to aid the early detection of neurodegenerative illnesses [29].

In addition, biomarkers have the potential to supplement conventional screening methods such as the Mini-Mental State Examination (MMSE) and the Montreal Cognitive Assessment (MoCA). In order to boost both sensitivity and specificity in

the identification of preclinical Alzheimer's disease, for instance, it has been demonstrated that combining cognitive tests with blood-based biomarkers can be beneficial [30]. Not only are nurses who have been trained in these integrated approaches able to give tests, but they can also monitor changes in longitudinal biomarkers, which allows them to trace the progression of disease over time.

### **Education of Patients and Advocacy Programs**

Educating patients and their families about the significance of early detection is another important function that nurses play in the healthcare system. Patients are given the ability to make informed decisions about their health outcomes as a result of their capacity to convey complicated medical information in a compassionate and easily accessible manner.

# Providing Patients and Their Families with Information Regarding the Importance of Early Detection

When it comes to early detection, one of the most important roles that nurses have is to educate people about neurodegenerative illnesses and the advantages of biomarker testing. Specifically, this entails removing the mystery around biomarkers, elaborating on how they function, and outlining the ramifications of their use in diagnosis and therapy. Patients who are reluctant or frightened about having biomarker tests, particularly invasive procedures like as lumbar punctures, are frequently encountered by nurses within the nursing profession. It is possible to relieve anxieties and encourage involvement in situations like these by providing information that is both clear and supported by evidence [31].

When it comes to fostering awareness among underserved populations, educational initiatives that are led by nurses have proven to be particularly beneficial. These populations may suffer from difficulties in gaining access to specialised diagnostic instruments. Community health nurses, for example, have established programs that are culturally customised in order to educate various patient groups about blood-based biomarkers and the role that they play in the detection of neurodegenerative illnesses. These efforts not only improve the understanding of patients, but they also improve access to early detection services and address discrepancies in that access.

### **Considerations of Ethical Implications and Obtaining Consent from Patients**

There are a number of ethical concerns that arise when biomarkers are utilised in the treatment of neurodegenerative disorders. These concerns include concerns around privacy, the psychological impact, and informed consent. Nursing professionals, in their capacity as advocates for patients, play a significant part in ensuring that these issues are effectively handled. For instance, in order to gain informed consent for biomarker testing, it is necessary to provide a comprehensive description of the test's objectives, any possible consequences, and any restrictions. Nurses are skilled at facilitating these conversations, which helps to ensure that patients have a complete understanding of the consequences of the decisions they make [32]. One more problem that arises from an ethical standpoint is the publication of biomarker results, particularly in situations in which individuals are asymptomatic but have a high chance of acquiring a neurodegenerative illness. It is imperative that nurses manage these talks with sensitivity, striking a balance between the requirement for transparency and the possible emotional impact on patients and their families while doing so. One of the most important aspects of the nursing role is serving as a source of counselling and support throughout this process. To add insult to injury, nurses frequently argue for rules that safeguard the confidentiality of patient information and provide equal access to diagnostics based on biomarkers.

### **Collaboration within Teams Involving Multiple Disciplines**

In order to make successful use of biomarkers in early detection, a collaborative approach is required, and nurses play an essential role as members of interdisciplinary teams. In addition to improving the overall quality of diagnoses and treatment planning, their contributions to patient-centered care, communication, and coordination of care are also beneficial.

# Collaboration with Neurologists, Primary Care Physicians, and Researchers, among other professionals

As liaisons between patients, neurologists, primary care physicians, and researchers, nurses ensure that biomarker testing is easily integrated into treatment pathways. They also ensure that patients receive the best possible care. For instance, nurses working in primary care settings frequently recognise patients who are exhibiting early signs of cognitive or motor deterioration and encourage referrals to experts for further examination. By ensuring that patients get biomarker testing in a timely manner, this coordination makes it possible to make correct diagnoses and to administer early intervention [33].

In the context of research, nurses play a crucial part in clinical trials that are centred on the validation of biomarkers and the creation of innovative diagnostic tools. Among their responsibilities are the recruitment of participants, the administration of tests, and the collection of data, all of which are exceptionally important for the advancement of research in the field of neurodegenerative diseases. In addition, nurse researchers frequently participate in the planning and execution of research projects, adding a distinctive patient-centered viewpoint to the process [34].

### The following are some examples of successful collaborations led by nurses:

For the purpose of early detection, several case studies highlight the impact that nurse-led collaborations can have. An example of this would be a memory clinic that was run by nurses and developed a strategy that combined cognitive assessment with plasma biomarker testing. The significance of incorporating nursing experience into diagnostic procedures was demonstrated by the effort, which resulted in a considerable reduction in the amount of time required to correctly diagnose Alzheimer's disease. In another instance, a multidisciplinary team was responsible for the management of patients who were diagnosed with Parkinson's disease. Nurses played a significant role in the coordination of biomarker testing and the interpretation of the data, working in conjunction with neurologists. Both the diagnosis accuracy and the ability to initiate therapy at an earlier stage were enhanced as a result of the efforts of the team, which ultimately led to improved patient outcomes [35]. By highlighting the potential of nurse-led initiatives to shift the landscape of early identification in neurodegenerative disorders, these examples demonstrate the potential of such initiatives.

When it comes to the early diagnosis of neurodegenerative disorders using biomarker-based techniques, nurses play a varied role in the process. It is impossible to overstate the importance of their efforts, which range from educating patients and pushing for ethical methods to directing screening programs and incorporating biomarkers into routine examinations. In addition, their participation in interdisciplinary teams, which improves the efficiency and effectiveness of diagnostic paths, is very beneficial. In order to further maximise their influence in this vital area, nurses can further optimise their impact by addressing existing hurdles, such as gaps in education and differences in the accessibility of resources. It is crucial to continue investing in training, research, and policy creation in order to equip nurses with the ability to fully exploit biomarkers for early diagnosis, which will ultimately improve outcomes for patients and their families.

### Existing Instruction and Education in the Field of Biomarkers A Comprehensive Analysis of the Nursing Curriculum Deficits Concerning Biomarkers

There is still a strong emphasis placed on foundational clinical skills in the core curricula of the majority of nursing programs; however, there is less of an emphasis placed on developing diagnostic tools such as biomarkers. It is common for nursing education to neglect to address the intricate science of biomarkers and their applications in neurodegenerative illnesses [36]. This is despite the fact that nursing education covers the management of chronic diseases and fundamental diagnostic tools. This gap is especially troubling because biomarkers are becoming an increasingly important aspect of the diagnosis and management of disorders such as Alzheimer's, where early detection has a substantial impact on the effectiveness of treatment and the results for patients.

A survey of nursing textbooks and course syllabi finds that there is very little information regarding the utilisation of imaging biomarkers (such as positron emission tomography) or fluid biomarkers (such as analysis of cerebrospinal fluid [CSF] or blood-based assays). In addition, nursing students are rarely acquainted with the most recent developments in biomarker research, such as plasma phosphorylated tau (p-tau217) or neurofilament light chain (NfL), despite the fact that these biomarkers are becoming increasingly important in clinical settings [37]. However, as a consequence of this, newly graduating nurses are frequently unprepared to interact with diagnostic methods that are based on biomarkers or to educate patients about these emerging technologies. This educational gap is made worse by the fact that trainees generally do not have the opportunity to participate in interprofessional collaborations. It is necessary to have strong collaboration with neurologists, radiologists, and laboratory scientists when doing diagnostics based on biomarkers. The nursing curriculum, on the other hand, frequently fails to place sufficient emphasis on the significance of such interdisciplinary teamwork, which results in nurses being inadequately prepared for their role in collaborative care models.

### Educational Workshops and Continuing Education Programs for Nurses Who Are Already in Practice

Through participation in continuing education programs and professional seminars, registered nurses who are currently working in the field of biomarker science have the opportunity to fill in knowledge gaps. Even though they are significant, these opportunities continue to be restricted in terms of their scope and accessibility. There are already available programs that frequently concentrate on broad updates in the management of chronic diseases, but they do not go into specialised areas such as biomarkers for neurodegenerative disorders [38].

Over the past few years, there have been efforts made to remedy this shortfall. Workshops that address the fundamentals of biomarker detection and interpretation have been developed by a number of professional organisations, for instance. Modules on imaging techniques (such as magnetic resonance imaging and positron emission tomography, or PET), fluid biomarker testing, and the ethical aspects surrounding preclinical detection are frequently included in these programs. On the other hand, attendance is frequently limited by practical constraints, such as the investment of time and money, which disproportionately affect nurses working in settings with little resources or in locations that are underserved [39].

There is a lot of potential in broadening access to education on biomarkers through the use of online learning platforms and virtual workshops. Platforms such as Massive Open Online Courses (MOOCs) have started delivering modules on neurodegenerative illnesses and diagnostic improvements; however, these courses need to be tailored particularly to nursing professionals in order to ensure that they are relevant and can be applied in a practical setting. Furthermore, interactive formats such as simulation-based learning have the potential to promote information retention and engagement, which in turn enables nurses to confidently employ biomarker-based diagnoses in clinical settings.

### **Recommendations for the Development of Capabilities**

It is necessary to implement a comprehensive plan in order to build capacity in nursing education and practice. This strategy should include the reform of the curriculum, the implementation of targeted training modules, and the active participation of nursing organisations in professional development.

# The development of specialised training modules specifically pertaining to neurodegenerative diseases and biomarkers

It is crucial for nurses to have access to specialised training modules that concentrate on neurodegenerative illnesses and biomarkers in order to equip themselves with the knowledge and skills necessary for early identification. It is imperative that these modules be incorporated into both pre-licensure nursing programs as well as continuing education frameworks. This will guarantee that nurses at every point of their professions have access to material that is pertinent to their job.

# The following should be included as essential elements of these training modules:

The basic ideas of biomarkers, such as their biological foundation, the many kinds of biomarkers (blood-based, CSF-based, and imaging-based), and their role in the development of neurodegenerative disease, will be covered in this part. Hands-on training in the administration and interpretation of biomarker testing, such as cognitive screening tools combined with blood-based diagnostics like p-tau217, are examples of practical applications. One example of an ethical concern is addressing issues with patient consent, data privacy, and the psychological effects of early discovery [40].

One instance of multidisciplinary collaboration is the training of nurses in the use of biomarker-based diagnostic processes in conjunction with neurologists, radiologists, and laboratory scientists.Pilot projects that have successfully used these components have already gone into operation. For instance, a recent initiative at a prominent academic medical center provided a twelve-week course on biomarkers in neurodegenerative diseases that was tailored especially for registered nurses. The potential for customized training to enhance clinical practice is shown by the participants' reported increased confidence in their capacity to assess diagnostic data and inform patients [41].

# The Contribution of Nursing Organisations to the Advancement of Professional Development

When it comes to promoting professional development and pushing for the incorporation of biomarker education into standard practice, nursing organisations play a crucial role. Through the utilisation of their networks and resources, these organisations are able to provide support for capacity-building projects on many lines of attack.

Advocacy for Curriculum Reform: Professional organisations like the American Nurses Association (ANA) and the International Council of Nurses (ICN) have the ability to persuade educational institutions to incorporate biomarker science into their core curricula. The ability of these organisations to push systemic change in nursing education can be demonstrated by their emphasis on the significance of biomarkers in the management of neurodegenerative diseases [42].

The development of certification programs Certification programs that are centred on neurodegenerative illnesses and biomarkers have the potential to act as a benchmark for clinical knowledge. These credentials would certify a nurse's competency in biomarker-based diagnostics, which would enhance the nurse's professional credibility and chances for career promotion [43].

Opportunities for Financial Support and Scholarships Nursing organisations have the ability to offer financial support for continuing education programs and workshops, particularly for nurses working in areas that are underserved. Financial barriers can be alleviated through the use of scholarships and grants, which ensures that everyone has equal access to chances for professional growth [44].

In addition, organisations can facilitate research and knowledge sharing by promoting research on nurse roles in biomarker use, publishing findings in journals that are subject to peer review, and sponsoring conferences to communicate best practices. Additionally, the acceleration of breakthroughs in this field can be further accelerated through collaboration with academic institutions and industry players [45].

Finding solutions to the information gaps that exist in the field of biomarker research is an essential step towards enabling nurses to take the lead in early detection efforts for neurodegenerative disorders. Through the implementation of nursing curriculum, the broadening of access to continuing education, and the promotion of collaboration between nursing organisations and educational institutions, we are able to provide nurses with the resources they require to flourish in this quickly developing area. The competency of individual nurses will be strengthened through the implementation of specialised training modules and professional development programs, which will also contribute to the improvement of patient outcomes and the enhancement of the efficiency of healthcare systems. It is imperative that nurses, who are the primary providers of care, be completely incorporated into the biomarker-driven diagnostic paradigm. This will ensure that the benefits of these technologies are realised for each and every patient.

### Conclusion

The early detection of neurodegenerative diseases through biomarkers represents a transformative advancement in healthcare, offering opportunities to mitigate the impact of conditions such as Alzheimer's disease and Parkinson's disease. Nurses play a pivotal role in this paradigm, bridging the gap between technological innovations and patient-centered care. Their contributions span critical areas, including the integration of biomarker-based diagnostics into routine assessments, patient education and advocacy, and active participation in interdisciplinary teams. By leveraging their accessibility and expertise, nurses are uniquely positioned to enhance early detection efforts, promote timely interventions, and improve patient outcomes.

Despite these contributions, significant challenges remain. Knowledge gaps in biomarker science, insufficient training in advanced diagnostic tools, and barriers

to equitable access to care underscore the need for systemic reform. Addressing these challenges requires a multi-faceted approach: reforming nursing curricula to incorporate biomarker education, expanding access to continuing professional development programs, and fostering collaboration between nursing organizations and other healthcare stakeholders. Additionally, advocating for policy reforms and resource allocation will ensure the equitable distribution of biomarker technologies across diverse patient populations.

As healthcare continues to evolve, the role of nurses in early detection must be prioritized to maximize the potential of biomarker-based advancements. By addressing existing barriers and investing in capacity-building initiatives, the nursing profession can further contribute to the timely diagnosis and management of neurodegenerative diseases, ultimately advancing the quality of care and improving the lives of patients and their families. Future research should continue to explore innovative strategies to empower nurses in this critical field.

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#### الأدوار المتطورة للتمريض والطوارئ في الاكتشاف المبكر للأمراض التنكسية العصبية باستخدام المؤشرات الحيوية

### الملخص

### الخلفية:

تمثل الأمراض التنكسية العصبية، مثل الزهايمر، وباركنسون، وهنتنغتون، تحديًا صحيًا عالميًا متزايدًا نظرًا لطبيعتها التقدمية وعدم وجود علاجات شافية. يُعد الاكتشاف المبكر باستخدام المؤشرات الحيوية، مثل التصوير والبروتينات في السائل النخاعي والمؤشرات الحيوية في الدم، استراتيجية أساسية لتحسين نتائج المرضى. يلعب الممرضون وفرق الطوارئ، بصفتهم مقدمي الرعاية الصحية في الخطوط الأمامية، أدوارًا حيوية في تنفيذ استراتيجيات الاكتشاف المبكر. ومع ذلك، لا تزال مساهماتهم مقدمي الإستفادة من المؤشرات الحيوية غير مستكشفة بشكل كافي، لا سيما في بيئات الطوارئ حيث تنفيز الموارئ معام مقدمي

#### الهدف:

تستكشف هذه الدراسة الأدوار المتطورة للممرضين وفرق الطوارئ في الاكتشاف المبكر للأمراض التنكسية العصبية من خلال استخدام المؤشرات الحيوية، مع التركيز على مساهماتهم في فحص المرضى، التثقيف، والرعاية متعددة التخصصات.

#### الطرق:

تم إجراء مراجعة منهجية للأدبيات باستخدام قواعد بيانات مثلPubMed ، وCINAHL، و Google Scholarتم اختيار الدراسات ذات الصلة بأدوار التمريض والطوارئ في استخدام المؤشرات الحيوية وإدارة الأمراض التنكسية العصبية. حدد التحليل النوعي الممارسات الحالية، العوانق، والفرص في هذا المجال.

#### النتائج:

تشير النتائج إلى أن برامج الفحص التي يقودها التمريض والطوارئ باستخدام المؤشرات الحيوية تُعزز بشكل كبير جهود الاكتشاف المبكر. ومع ذلك، تم تحديد عوائق مثل نقص التدريب على المؤشرات الحيوية وقلة الوصول إلى الأدوات التشخيصية المتقدمة. أظهرت الأساليب التعاونية وبرامج التدريب المتخصصة قدرتها على تحسين النتائج وتوسيع مساهمات فرق التمريض والطوارئ. **الخلاصة:** 

يلعب الممرضون وفرق الطوارئ دورًا محوريًا في الاكتشاف المبكر للأمراض التنكسية العصبية من خلال تطبيق المؤشرات الحيوية. يُعد تعزيز التعليم، وتوفير الموارد، وتشجيع التعاون بين التخصصات أمرًا ضروريًا لتحسين الرعاية. ينبغي أن تركز الأبحاث المستقبلي<mark></mark>ة على تطوير أطر موحدة لدعم أدوارهم في هذا المجال المتطور.

#### الكلمات المفتاحية:

أدوار التمريض، المؤشرات الحيوية، الأمراض التنكسية العصبية، الاكتشاف المبكر، مرض الزهايمر، مرض باركنسون، تدخلات التمريض والطوارئ.