Clinical assessment of the vascular dementia

El-Sayed, H. A.

Cairo Univ. (EGY). Fac. of Med.

Thesis ; M.Sc. 2001

The study was designed to clarify the various methods of diagnosis of various types of dementias as well as to identify the various risk factors, clinical features, neuropsychological criteria and neuroradiological findings of vascular dementia. The present study included 100 patients with cognitive deficit with age above 60 years and 40 normal controls.

All patients and control persons in this study were subjected to the following; MMSE, DSM-IV for Alzheimer dementia, DSM-IV for vascular dementia, Hachinski ischemic scale, ADDTC (Alzheimer's disease diagnostic and treatment centers) scale, NINCDs-ADRDA (national institute for neurological and communicative disorders and stroke-the Alzheimer's disease and related disorders association) scale and Hamilton depression scale. Also, CT and/or MRI brain were used.

The study revealed that neuroradiology was the most sensitive method of diagnosis of dementia (96.5%), while Hachinski ischemic scale and M.M.S.E sensitivity was moderate while that of clinical examination is low. Regarding vascular dementia Hachinski ischemic scale was the most sensitive scale; while ADDTC scale was the least sensitive one. Regarding Alzheimer dementia NINDS scale was the most sensitive scale (92.6%) while Hachinski scale was the least sensitive one (40%). Regarding mixed dementia M.M.S.E. had the highest level of sensitivity (85.7%) while DSM-IV had the lowest level of sensitivity (28.6%). All cases with vascular dementia (100%) had neurological deficits while (72.7%) of those having mixed dementia and (10.5%) of those with Alzheimer dementia had neurological deficits.

There was significant correlation between the increasing age of the patients with vascular dementia and the degree of cognitive and neuropsychological impairment. Hypertension was the most prevalent and important risk factor for vascular dementia especially if uncontrolled.

Moreover, orthostatic hypertension was another important contributing risk factor. All patients with vascular dementia had focal neurological deficits supporting the vascular nature of the demented patients. There was significant correlation between the duration of vascular dementia and the severity of cognitive and neuropsychological impairment. Regarding the neuroradiological