

9TH MULTIDISCIPLINARY INTERNATIONAL Conference of Biological Psychiatry

«Stress and Behavior»

Proceedings of the 9th International Multidisciplinary Conference «Stress and behavior»

Saint-Petersburg, Russia, 16–19 May 2005

Editor: Allan V. Kalueff, PhD

CONFERENCE ABSTRACTS

6. GENERAL QUESTIONS: PSYCHIATRY OF STRESS

PATTERNS OF COGNITIVE, NEUROLOGICAL, AND MENTAL DYSFUNCTIONS AS RISK FACTORS OF ALZHEIMER DISEASE IN RELATIVES OF ALZHEIMERS PATIENTS

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Alzheimer disease (AD) is a slowly progressive neurodegenerative disease, characterized by a pre-symptomatic phase during which neuronal degeneration occurs before clinical symptoms appear. By the time of AD diagnosis, 80% of neurons are destroyed. It is therefore important to improve early detection of AD in both general population and risk groups, e.g., first-degree relatives. The first aim of the present study was to investigate specific cognitive defects in such relatives, also assessing personal, neurological, mental patterns associated with these defects. Second aim was to establish profiles of patients, and emphasizing negative profiles relatives with specific cognitive dysfunctions for further prospective investigation. Two experimental groups have been examined: 40 first-degree relatives and controls patients which has been divided into three age subgroups. Research included primary interview; EEG and genetic examination; investigation of cognitive functions (battery of neuropsychological memory tests, motor functions tests and psychometric scales of attention, mind, IQ), mental functions (psychopathological scales for measuring level of depression and anxiety — Hamilton, Spilberger), personal features (age, education) and possible concomitant neurological diseases. Results: Cognitive dysfunctions characterized for early stages of AD have been revealed, including memory defects (disturbances of working and visual memory, increase of influence of the interfering activity on memory performance); nominative aphasia, frontal lobe dysfunctions. Cognitive disturbances were found in patients with low intelligence, various neurological diseases, with depression and increased anxiety, and were unrelated to age or education. Conclusions: Our results allowed us to establish 6 specific patterns of neurological and psychiatric functions characterizing relatives and emphasizing negative impacts for further prospective study. The further investigation analyses the dynamics of disturbed cognitive functions in these groups, especially in those having a negative profiles, and assessing those contracting AD. Collectively, this can assist to find specific reliable criteria of early diagnostics, and improve therapy of AD.