XXI World Congress on Parkinson's Disease and Related Disorders

Milan, Italy

6-9 December 2015

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Abstracts of

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ORAL POSTER SESSION 1

6 DECEMBER 2015

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P 1.113

DESCRIPTION OF COGNITIVE DISORDERS OF ALZHEIMER'S DISEASE AND PARKINSON'S DISEASE

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Objective: To study the cognitive disorders of Parkinson's disease (PD) and Alzheimer's disease (AD).

Methods: We studied 21 patients with PD (mean age $61,0 \pm 10,8$ years) and 18 patients with AD (mean age $61,8 \pm 6,8$ years). Dementia according to DSM-IV criteria was diagnosed in 7 patients with PD and all patients with AD. Assessment of cognitive function was performed using MMSE. Also Hamilton Depression Rating Scale and neuroimaging study used.

Results: The most prominent cognitive deficits observed in patients with AD (mean score MMSE $19,3 \pm 2,1$), the average score MMSE in the group with PD $26,8 \pm 2,8$, patients with PD and dementia $21,0 \pm 2,0$. When PD occurrence of dementia also accompanied by increase of neural disorders, but to the fore violation praxis and gnosis and worsening dysfunction in frontal regions. In the group with AD patients with more severe dementia were significantly severe violations of praxis and gnosis, and neuropsychological symptoms of dysfunction of the temporal divisions and diffuse cortical lesion. In PD noted positive correlation between worsening cognitive disorders and severity of cerebral atrophy and MRI data. There were no significant differences between patients with relatively mild and more severe dementia in AD and neuroimaging parameters.

Conclusions: The study showed particular cognitive structure of dementia in PD and AD. Among the patients in both groups were found depressive disorders. At PD depression did not have any structural correlates, marked a tendency to increase the development of depression in dementia.

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POSTER SESSION 3

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FEATURES NEUROIMAGING AND NEUROLOGICAL DISORDERS IN ALZHEIMER'S DISEASE WITH PARKINSONISM

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Objectives: Determination of clinical-neurological and neuroimaging features of manifestations of Alzheimer's disease with Parkinsonism

Methods: We studied 25 patients with parkinsonism in the Tashkent Medical Academy for the period 2013-2015. In accordance with the generally accepted criteria, 20 patients were diagnosed with Parkinson's disease (PD), and 5 patients with Alzheimer's disease (AD). The study included clinical and neurological evaluation with quantitative scales that measured various aspects of parkinsonism, as well as oculomotor, pseudobulbar, and vegetative symptoms.

Results: In patients with AD, the first signs of parkinsonism appeared in the background of already developed neuropsychological defects, the main feature of which was the weakening of their memory. Characteristically, parkinsonism in AD patients did manifest symmetrically and did show a moderate severity of the mainly akinetic-rigid symptomatology. Cognitive impairment in AD patients with parkinsonism were not significantly different from PD patients with dementia. However, in AD patients, there was a tendency towards more impaired logical memory and memory (delayed reproduction) than in demented PD patients, while PD patients with dementia did show more verbal problems and problems with directed association. Imaging studies did reveal a diffuse decrease in cerebral perfusion (more frequently in demented PD patients as compared to parkinsonian AD patients). Characteristically, in parkinsonian AD patients, perfusion was especially decreased in the parietal and temporal areas, with relative sparing in the frontal and occipital cortex.

Conclusions: The diagnosis of parkinsonian disorders is probabilistic in nature and may be revised at follow-up, in connection with emerging new clinical data. In our opinion, dynamic monitoring is an important diagnostic resource, because these disorders may develop fully in time.