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MILD COGNITIVE IMPAIRMENT - CORRELATIONS OF IMAGISTIC AND CLINICAL DATA D.M. Podea

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Mild cognitive impairment is the clinical state between normal cognition and dementia in elderly people which does not interfere notably with activities of daily life; subjects perform more poorly on a variety of cognitive, functional and behavioral measures than normal persons of the same age.

The study comprises 141 subjects between 60 and 92, diagnosed with mild cognitive impairment with Mini Mintal State Evaluation (MMSE), clock drawing test (CDT) and computer tomography.

MMSE score between 28-21 points is considered mild cognitive impairment.

The computer tomography imaging showed specific types of cortical and subcortical atrophies. Tomography examination multislides was performed with 2.5 mm axial sections of brain and axial and coronary reconstruction with sections at 1mm, presenting accurate diagnosis criteria, highlighting the group studied the following:

 \emptyset 53.1% (75 patients) specific lesions to vascular dementia : moderate atrophy of the temporal lobe, hippocampus atrophy, frontal diffuse ischemia and subcortical hipodense ischemic lesions ;

Ø 12.1% specific changes to Alzheimer's disease, as: obvious atrophy of hippocampus, ipsilaterale enhancement of temporal cone of lateral ventricle, temporal lobes atrophy, diffuse cerebral atrophy (lateral ventricles less extended), widening perimezencefalics cysternes:

Ø specific pathological changes due to age (34.8%): widening external and internal fluid spaces (lateral ventricles, ventricle III) enlargement of fronto-temporal fluid space, heterodense millimeter images on basal nuclei.

The study emphasizes the importance of imagistic examination to increase the accuracy of clinical diagnosis allowing early diagnosis of Alzheimer and vascular dementia, in order to recomand specific therapy from the early stages of cognitive disfunctions.