P-463 - DEVELOPMENT OF THE BRIEF EPISODIC MEMORY ASSESSMENT (BEMA): A NEW SCALE FOR EPISODIC MEMORY IN ALZHEIMER'S DISEASE TO COMPLEMENT ONE-PLUS-ONE IN VIVO DIAGNOSIS STRATEGY

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Introduction: Recent advances in biomarker technology have allowed for the development of highly predictive tests for Alzheimer's disease (AD) when combined with standard psychometric tests. Current research in AD utilizes the ADAS-Cog and/or the MMSE as standard measures; they do not exclusively address the specific deficits expected in an amnesic syndrome of the hippocampal type as express with AD.

Objectives: Because episodic memory degradation is most strongly predictive of conversion from mild cognitive impairment (MCI) to AD, a clinical measure targeting this deficit is warranted.

Aims: To utilize current knowledge of neural correlates of different stages of episodic memory function and their modulation by AD to develop a psychometrically sound instrument.

Methods: The authors developed a brief scale that captures registration, storage and retrieval of information along four identified domains of episodic memory in AD. A second stage was to confirm BEMA in institutionalized subjects, and assess reliability and validity.

Results: Preliminary results indicate good test-retest reliability and adequate sensitivity and specificity. The BEMA was positively and significantly correlated with other measures of episodic memory. The [insert scale name or abbreviation] yields a total score, scores for 3 lifetime periods and the duration of episodic memory impairment.

Conclusions: Findings suggest that a richer understanding of the memory deficits in AD can lead to the development of an instrument which taps different aspects of episodic memory function. This scale can aid in the screening, assessment and treatment of early AD and complement the newly developed one-plus-one strategy.