The Value of Cognitive Screening Tests in Patients with Amnestic and Non-amnestic MCI.

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Introduction: Although the original diagnostic criteria for mild cognitive impairment (MCI) highlighted the importance of memory impairment, more recently the MCI classification was expanded to encompass other cognitive domains, allowing the diagnosis of amnestic or non-amnestic MCI.

Objective: The primary aim of this study was to identify cognitive tests and illustrate a neuropsychological profile of cognitive subtests of persons with amnestic MCI (aMCI) and non-amnestic MCI (naMCI).

Material and Methods: The study used a cross-sectional design. The study group consisted of 35 aMCI and 16 naMCI subjects matched for age, sex and years of education. The groups did not differ according to CDR. All subjects underwent a wide range of psychological tests including MMSE, TYM, DemTect, FAS, CDT, IADL and GDS. The following tests were completed to measure episodic memory, working memory, executive functions, perception and language. The analysis of variance (ANOVA) was used to analyze the differences between group means.

Results: The statistical analysis illustrated that total scores of MMSE, TYM, DemTect and FAS to differentiate the aMCI from naMCI subjects. Compared to naMCI, aMCI subjects scored lower in MMSE (p=0.0104) and in DemTect (p=0.0002) while they had higher scores in TYM (p=0.0067) and FAS (p=0.0427).

Conclusions: This study shows that cognitive screening tests provide valuable information regarding the differential diagnosis of aMCI versus naMCI. MMSE and DemTect may be seen as superior screening tests in aMCI, while TYM and FAS in naMCI subjects.