MCI Conference

Story Angles

Canadians dismiss early signs of dementia, lose out on early treatment benefits
It is estimated that half-a-million Canadians aged 65-and-older have Mild Cognitive Impairment (MCI). Most will dismiss the early signs of dementia as a normal part of aging or delay reporting their troubling symptoms to their family doctor out of fear. Only a small percentage will pursue a diagnosis with their doctor. Patients who delay seeking help can lose out on the benefits of early treatment to halt their cognitive slide. Interview conference co-chair Drs. Tiffany Chow and Nicole Anderson and other clinicians about what it’s going to take to get more Canadians diagnosed and treated earlier, before full dementia symptoms take hold.

Battling the MCI stigma
Few people with MCI will talk about their condition publicly. They may hide the diagnosis from their children, their friends and co-workers, out of fear of being socially stigmatized, losing their job, their driver’s licence, being turned down for insurance, or burdening family members with worry. The MCI “label” can have a devastating psychological, financial and social impact. A Canadian medical task force – which included Drs. Serge Gauthier (McGill University) and Michael Gordon (Baycrest) – wrote about this dilemma in a commentary in the journal Alzheimer’s and Dementia last year (7 (2011) pp. 330-332).
Do spot interviews with physicians and psychologists at the conference. Suggest: Tuesday March 27 presenter Dr. Scott Roberts, Boston University School of Medicine; Monday afternoon workshop presenter Dr. Kelly Murphy, a clinical neuropsychologist who leads the Memory Intervention Program at Baycrest; and Dr. Michael Gordon, a bioethicist at Baycrest and one of Canada’s longest-serving geriatricians.

Homebound adults face greater risk of MCI and Alzheimer’s
Conference presenter Dr. Aron Buchman from Rush Alzheimer’s Disease Centre will present recent evidence linking constricted life space with cognitive decline in older adults, Wednesday, March 28 at 3 p.m.

Persons with MCI have trouble remembering a new melody
Researchers from Queen’s University present evidence showing persons with Mild Cognitive Impairment have poorer memory for remembering new or unfamiliar melodies compared to healthy persons. But the MCI group had little trouble remembering familiar music.
Scientific Poster #6

Computer game tests for early signs of Alzheimer’s
Researchers from McGill University say a computer game that involves exploring a virtual town may be effective for detecting early signs of Alzheimer’s.
Scientific Poster #11
Women at greater risk of converting from MCI to dementia
Researchers from Norway examined the medical records of 60 women and 30 men – diagnosed with MCI – to see who converted to clinical dementia. They discovered that 82% of the women progressed into dementia, and only 50% of the men. The female gender may be a substantial risk factor for conversion from MCI to dementia.

Scientific Poster #15

Beating back dementia with cognitively-stimulating leisure activities
The projected increases in Alzheimer’s disease with aging populations has heightened public and scientific interest in finding ways to maintain cognitive vitality and prevent the onset of dementia. Cognitively-stimulating leisure activities may reduce the risk of developing dementia.

Interview two conference presenters on Tuesday March 27: Dr. Joe Verghese (Albert Einstein College of Medicine, New York) about his research to identify the most effective leisure activities for preventing cognitive decline; and Yaakov Stern, a leading expert on lifestyle activities – education, occupation, leisure activities – that are associated with ‘cognitive reserve’ (Sergievsky Centre and the Taub Institute, Columbia University).

Helping MCI patients delay conversion to dementia
Clinical neuropsychologists will present the latest exercise and drug interventions, plus Baycrest’s Memory Intervention Program, in a series of workshops on Day One of the conference (Monday, March 26), from 1:30 p.m. to 2:45 p.m.

Attend the Monday afternoon workshops and interview presenters Drs. Morris Freedman and Kelly Murphy (Baycrest), and Louis Bherer (L’Université du Québec a Montréal) afterward. Interview Dr. Nasreen Khatri (Baycrest scientist-clinician) about exciting early evidence on the potential benefits of cognitive behavioural therapy for not only alleviating depressive mood symptoms in stressed caregivers, but improving their cognitive health. She presents her workshop at 3:15 p.m. on Monday.

Delaying dementia by two years could save the healthcare system billions of dollars.
In the next 10 years, a program that could delay dementia onset by two years would reduce the number of Canadians with dementia by 21.6% and save the healthcare system $24.2 billion dollars. In 30 years’ time, that same program would reduce the number of Canadians with dementia by 36.4% and save $218.6 billion dollars.

Statistics reported in the 2010 Rising Tide study by the Alzheimer Society of Canada, pp.30-33.

Interview a top executive from the Alzheimer Society about the importance of diagnosing dementia at the very earliest stages, such as MCI – implications for the patient, caregivers and the healthcare system.
When it comes to cognitive changes with aging...what’s normal, what’s not?

Persons with MCI commonly have mild problems performing complex functional tasks which they used to perform previously, such as paying bills, preparing a meal, or shopping. They may take more time, be less efficient, and make more errors at performing such activities than in the past. Nevertheless, they generally maintain their independence of function in daily life, with minimal aids or assistance. Most have self-insight and know there is something amiss with their memory. People caring for elders, as well as spouses, have a role to play in spotting the MCI warning signs and encouraging their loved one to see a doctor.

Interview conference co-chair Dr. Nicole Anderson, a clinical neuropsychologist who has co-authored a book on MCI, due for release this summer. See the Tips Sheet on Memory Changes: What’s Normal, What’s Not in the press kit.

Not all MCI is the same.

Hear the latest evidence about MCI from a Mayo Clinic expert

MCI has the following features. It becomes more common with advancing age. There may be some gender differences between men and women that relate to a differential rate of progression of cognitive impairment between sexes. People diagnosed with MCI have a ten-fold greater risk of converting to a clinical dementia compared to cognitively normal persons. There are important differences between amnestic and non-amnestic types of MCI with respect to prognosis. There is also an increased likelihood of Alzheimer type biomarkers - positive amyloid imaging, abnormal FDG-PET patterns of hypometabolism and greater amounts of brain atrophy - in MCI patients.

Interview keynote speaker Dr. David Knopman (Mayo Clinic, Minnesota) on Tuesday March 27 about the epidemiology of MCI.

New U.S. guidelines that expand dementia definition to include a “pre-clinical” stage, prompt concerns from medical community

American dementia experts have expanded the dementia definition to include a pre-clinical stage (before symptoms appear). Therapeutic treatments may be more effective when started early before the disease is more advanced in the brain. But some clinicians are warning that early diagnosis may have a dark side for the patient - societal labeling, denial of insurance, employment prejudice, and even catastrophic reactions at disclosure of diagnosis, such as depression or increased risk of suicidal behaviour.

The double-edged sword of an early dementia diagnosis. Interview conference keynote speaker Dr. Marilyn Albert on Monday; Tuesday morning presenter Dr. Scott Roberts, Boston University School of Medicine; conference co-chair and Monday afternoon workshop presenter Dr. Tiffany Chow; and Drs. Michael Gordon (Baycrest) or Serge Gauthier (McGill University) who expressed their concerns in a journal commentary last year.