شبكة المعلومات الجامعية

بسم اللّه الرحمن الرحيم

شبكة المعلومات الجامعية

التوثيق الالكتروني والميكروفيلم

شبكة المعلومات الجامعية

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التوثيق الإلكتروني والميكروفيلم

قسم

نقسم باللّه العظيم أن المادة التي تم توثيقها وتسجيلها علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات

يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار

Simple Reaction Time;Validity And Reliability In Detection of Cognitive Dysfunction

Thesis

Submitted for partial Fulfillment of Master Degree in ***Geriatrics and Gerontology***

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بسم الله الرحمن الرحيم
وعلمك ما لم تكن تعلم
وكان فضل الله عليك عظيما

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List of Abbreviations

Abb.	Full term

ACER……Addenbrookes Cognitive Assessment Updated

AChE-I……..Acteyl Cholinesterase inhibitors

AD…….Alzheimer Dementia

ADL…….....Activity of Daily Living.

AMTS……...Abbreviated Mental Test Score

APOE-E4……..Apo Lipoprotein E4.

CAMCOG……....Cambridge Cognitive Examination

CAMDEX…….Cambridge Mental Disorders of the Elderly Review

CDT……...clock-drawing test

CVAT……....Continuous Visual Attention test

DHA……..Docosahexaenoic acid

DLB……..Dementia with Lewy Bodies

EPA……...Eicosapentaenoic acid

GDS……..Geriatric depression scale

GPCOG…….General Practitioner Evaluation of Cognition

HADS…….Hospital Anxiety and Depression Scale.

HRQOL…….Health related quality of life

IADL……..Instrumental Activity of Daily Living .

MCI……....Mild cognitive impairment.

MMSE…….....……..Mini-Mental State test

MoCA……Montreal cognitive assessment

NSAIDs ……Non-Steroidal Anti-Inflammatory Drugs

PHC…….....Primary health care .

QoL……..Quality of life

RCT……..Randomize control trial

RTs……...Reaction times

RUDAS…….Rowland Universal Dementia Assessment Scale

SED-11Q……..Questionnaire on Symptoms of Early Dementia-11

SRT……..Simple Reaction Time

TBI……...Traumatic brain injury

VaD……..vascular dementia

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Abstract

Background: Dementia is very common, but it should also be noted that with age, the prevalence rises steeply, more than mortality. The necessity to screen increases proportionally as the annual incidence increases with age

Objective: To establish the validity and reliability of simple reaction time in cognitive disorder detection.

Methods: A case control study including 90 elderly (30 with normal cognition ,30 with MCI ,30 with early stage dementia) at Ain Shams University hospitals. Cognitive assessment was done using the Cambridge Cognition Examination (CAMCOG) and the relationship between delayed reaction time and Cognitive decline.

Results: Using the validated Cambridge Cognition Examination cut offs for (normal cognition above 89, MCI between (78 and 89), early stage dementia below 78. We found that better scoring in reaction time was associated with better CAMCOG performance.

Conclusion: The results suggest that reaction time is robustly associated with level of cognitive
function and that the former association between delaying of reaction time with risk of cognitive impairment and dementia in old age**.**

INTRODUCTION