

Parkinson's Disease Dementia, An Under Recognized Concern for Patient Safety and Quality of Life

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Abstract:

Background: Life expectancy is improving in medium to low to medium income countries like Nigeria with a population of over 220 million. The prevalence of degenerative disorders like Parkinson's Disease (PD) is common and management modalities are limited by financial and technical reasons. Dementia is often under recognized and under addressed in such patients with adverse effects on QOL, safety and low interventions in such patients.

Objectives: To determine the prevalence and predictors of dementia in PD in Northern Nigeria and ensure the data are incorporated in the continuum of care of PD patients and improve safety and QOL and improve coping strategies with PD as a chronic progressive disease.

Methods: A tertiary hospital based cross sectional study utilizing the Montreal Cognitive Assessment Score. The MM-PD and severity index and QOL and management of patients and care givers questionnaires were all conducted. IRB approval was obtained as well as signed informed consent. PD-CI/dementia and depression and Anxiety (the Hospital anxiety and depression scale HADS were also utilized. The Hamilton or Becks/DSM V screening tools were also applied. Depression and anxiety screenings were also completed. PD-MCI/H & Y stage and score on PDQ-39 item (for QoL in PD were determined as well as the domain specific impairments scores.

Results: PD dementia/cognitive impairment was identified to have a prevalence of 25%, p value of 0.001, adjusted OR of 6.8. This was independently associated with less than 12 years of formal education in multiple regression analyses after analyses of potential positive correlates on bivariate analyses. Domain specific impairments and dichotomization of the data based on treatment status into PD-on- treatment and treatment naive and the prevalence of PD-MCI for both category was found to be 60% vs 40% and was not statistically significance. A low QOL score was identified and a high anxiety and depression scores were identified in PD patients with dementia.

Discussion: This is the index study of PD related dementia in Northern Nigeria. A high prevalence was noted at 25% across the spectrum of the PD patients natural history and it is unrelated nor modified by all therapeutic modalities. Patients, family and care givers were hitherto unaware of the early dementia in the PD patients.

Conclusion: Screening for dementia/cognitive impairments in PD should be routinely incorporated in the initial and subsequent assessments and management of PD patients. Patients and family members should be counseled effectively to improve patient safety and well being and allay anxiety and decrease the rates of super imposed depression due to a lack of full understanding of the natural history if the disease.