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Depressive Symptom Endorsement among Alzheimer' s Disease, Vascular Dementia and Mild Cognitive Impairment

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ABSTRACT

Background: The Geriatric Depression Scale (GDS) is widely used to assess depressive symptoms in clinical and research settings. This study utilized a 4 factor solution for the 30-item GDS to explore differences in the presentation of depressive symptoms in various types of cognitive impairment. Method: Retrospective chart review was conducted on 254 consecutive cases of community dwelling elderly newly diagnosed with mild Alzheimer' s Dementia (AD) n = 122, mild Vascular Dementia (VaD) n = 71 or Amnesic Mild Cognitive Impairment (aMCI) n = 32 and Non-Amnesic MCI (nMCI) n = 29. Results: Analysis revealed no significant differences ($p < 0.05$) between the groups for total GDS score, the Dysphoria subscale or Cognitive Impairment subscale. AD endorsed significantly fewer symptoms than VaD on Apathy, Meaninglessness and Dysphoria. AD did not endorse a significantly different number of items than aMCI on any of the subscales. AD endorsed significantly fewer items than nMCI on Apathy and Meaninglessness. VaD endorsed significantly more items than the aMCI only on the Meaninglessness subscale ($p > 05$). No statistically significant differences were found between VaD and nMCI or between the MCI groups. Conclusions: Support is provided for the use of GDS subscales in a wide range of cognitively impaired elderly. This study suggests in mild dementia the number and type of depressive symptoms vary significantly between AD and VaD. There are indications that aMCI patients are similar in their symptom endorsement to AD and nMCI are similar to VaD which is consistent with some of the notions regarding likely trajectories of the respective MCI groups.

KEYWORDS

Depression; Cognitive Impairment; Alzheimer' s; Vascular Dementia; Mild Cognitive Impairment

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