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Subcortical dementia developed at high altitude in Himalayas – an army case study investigation with MMSE and new UMACE diagnostic tool

Mangal Kardile
Mental Health Aims, India

This study aims to use newly developed cognitive impairment diagnostic tool UMACE & MMSE to assess development of 👃 subcortical-dementia symptoms in a 52 year old Indian-Army-doctor when posted at high-altitude-in-Himalayas about 6000-10000 feet. The patient started developing Memory & Cognitive Impairments at the age of 49 showing first symptoms of headache+hypertension, his symptoms increased with recurrent posting at high-altitudes till the age of 58, requiring clinical investigations. He developed personality changes, forgetfulness showing withdrawal from daily tasks. MRI revealed moderate dilation of the ventricular system suggesting Normal-Pressure-Hydrocephalus, showing bilateral-lateral ventricles out of proportion to the sulcal prominence, suggesting subcortical dementia, MMSE score 23/30 moderate CI, simultaneously  $assessed\ by\ new\ diagnostic\ tool\ UMACE\ (standardization\ process\ completed\ administrating\ three\ adult-\ samples:\ non-clinical-linear process\ completed\ administrating\ three\ adult-samples:\ non-clinical-linear process\ completed\ administration\ process\ completed\ administration\ process\ proce$ (n=78); with/without psychiatric-disorders (n=70), with/without neurological-disorders (n=207). Psychometric properties for 12-item-UMACE and 11-item-MMSE, in the largest sample (including 20% illiterate) cut-off 28.5 of possible 40, had AUC 92.5%, sensitivity 89.7%, specificity77.0%, demonstrating UMACE utility in detection of CI in all samples)). UMACE could assess specific CI in spatial mapping and episodic memory with suggestive involvement of parahippocampal division supporting neuro-imaging investigations of Normal-Pressure-Hydrocephalus showing bilateral-lateral ventricles out of proportion to the sulcal prominence suggestive of subcortical dementia. Lack of mental-health-awareness and facilities pertain to detect CI within Indian-army-population deployed frequently in Himalayan-high-altitude ranges, with few dementia-cases known till date. Considering army-regime, regular screening for memory and cognitive impairment and cognitive rehabilitation is necessary as applicable to global diversity.

## **Biography**

Mangal Kardile (MPsychClin, MPhil & IDMHL&HR), earned certificate in "Medical Neuroscience" Duke University on Coursera, March'16". She has been in the research work particularly in memory and cognitive impairment since 2011, presented research papers in international conferences in many countries. She has been awarded funding from Australian NGO "Capacity Australia" for developing a diagnostic tool UMACE (Universal Memory And Cognitive Exam) which is suitable to all population except people having IQ below 70 and Visually impaired. She is a founder & proprietor of "Mental Health Aims" Nasik, India and a member of IPA, ARDSI and Editorial Board Member of IJHSR.

kardile.mangal@gmail.com

**Notes:**