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ASSOCIATION OF PSYCHIATRIC PICTURES WITH COGNITIVE AND MOTOR SYMPTOMS OF LEWY BODY DISEASE-AN ANALYSIS OF 60 MIBG-VERIFIED CASES

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Background: Lewy body disease (LBD) is a collective term of Parkinson's disease (PD), PD with dementia (PDD), incidental LBD (iLBD), Lewy body dysphagia, pure psychiatric presentation (PPP) and dementia with LBD (DLB). Diagnosis of LBD has suffered from symptomatic heterogeneity because LBD has diverse clinical symptoms that are grouped into four; cognitive disturbance, psychiatric features, motor and non-motor symptoms. PPP may be the fourth subtype in which non-neurological psychiatric symptoms and cognitive disturbance lasted for many years. This study investigates how psychiatric pictures are associated with the other symptom groups in myocardial meta-iodobenzylguanidine (MIBG)-verified subjects with LBD.

Methods: Sixty patients (28 women and 32 men) were classified into three psychiatric pictures; depression-anxiety (Group D: 27 patients), isolated visual hallucinations (Group V: 16 patients) and psychosis (Group P: 17 patients). Fifty six cases were examined by single photon emission tomography (SPECT) study of the brains in which hypoperfusion were found in 37 cases and 19 cases showed no abnormality. After that, we determined final diagnoses; PD, PDD, DLB and PPP with the DSM-IV, the unified Parkinson's disease rating scale (UPDRS), and Mini-mental state examination (MMSE).

Results: 40% of the Group D patients remained depressive without Parkinsonism and 50% had or developed PD. Most Group P patients developed PDD or DLB. Statistics provided four clusters with combinations of the clinical symptoms and SPECT study. PD-depression and PPP-depression with/without frontal hypoperfusion, PDD-psychosis with temporal hypoperfusion, and DLB-visual hallucination with occipital hypoperfusion. Thus, Group V had DLB and Group D had PD and PPP. Group P had PDD. Motor symptoms were closely associated with cognitive disturbance.

Conclusions: PPP is a prodromal depression of PD and also preparative of iLBD. The psychotic feature and visual hallucinations, when complicated by motor symptoms, predicts following dementia. Isolated depression with non-motor symptoms is a risk for PD.

Biography

Katsuji Kobayashi is the President of the Awazu Neuropsychiatric Hospital, Komatsu, Ishikawa-ken, Japan, 2007-present, Docent of Kanazawa University Graduate School of Medicine, Kanazawa, Ishikawa-ken, Japan. From 2007 to present he is Associate professor of Kanazawa University, 2002-2007. He gained a Special Award from the Japanese Society of Geriatric Psychiatry in 2005. Fellowship of the Centre national de la recherche scientifique (CNRS) in Laboratoire de Neuropathologie Laboratoire Raymond Escourolle (1992-1994)

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