

Apathy in Alzheimer's dementia: its prevalence increases with disease severity and apathy negatively impacts upon object naming and mood

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The Methodological Question Being Addressed

The aim of this study was the evaluation of the influence of apathy on cognitive and behavioural symptoms in different stages of AD.

Introduction: Alzheimer's disease (AD) is the most common cause of dementia among the elderly. Although cognitive deficits are the clinical hallmark of AD, various non-cognitive symptoms termed „behavioural and psychological symptoms of dementia” (BPSD) are common and can dominate the clinical manifestation. BPSD have been observed in up to 98% of patients with dementia and include apathy, agitation, aggression, anxiety, delusions, sleep disturbances, and hallucinations, among other symptoms. Apathy is defined as a symptom of decreased motivation and psychomotor lethargy. There is widespread acceptance in the field that apathy is an important and frequent behavioural symptom in AD with a negative impact on the course of the disease.

Methods: We allocated 284 patients with AD from the outpatient memory clinic of the Department of Psychiatry, Medical University Innsbruck between to the study. All participants underwent a clinical examination and neuropsychological testing, records were reviewed as well. Apathy was assessed using the Neuropsychiatric Inventory (NPI). The association between apathy, dementia severity, cognitive functions, depression (assessed with the Geriatric Depression Scale, GDS) and psychotropic medication was analysed by Pearson's correlation, chi-square test and ANOVA.

Results: Out of 284 patients with AD (mean age 79.9±7.9 years) 20.4% presented symptoms of apathy as measured with the NPI. While the prevalence of apathy in AD patients with mild dementia (MMSE>20) was 7.4%, apathy was present in 46.9% of severe stage patients (MMSE<10). Correlation analyses showed a positive correlation of apathy with the GDS score and more severe impairment in the Boston Naming Test (BNT). Of all psychotropic medications, only antipsychotics were associated with higher apathy scores.

Conclusions: Apathy is a common behavioural symptom in patients with dementia with increasing prevalence in severe disease stages. The positive correlation with the GDS score underscores the difficult differential diagnosis between apathy and depression. In addition, we found that apathy is associated with impaired verbal abilities, e.g., object naming. These results suggest that

patients with severe dementia should be sufficiently verbally stimulated even though the ability for active verbal communication may be attenuated in this stage of disease.

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