

EARLY DETECTION MATTERS IN AD



Alzheimer's disease (AD) slowly develops over years causing irreversible injury to the brain. By the time most patients show symptoms, the underlying disease process has been at work for **up to 20 years**.¹⁻⁴



WHY TIMELY DETECTION IS CRUCIAL

The first clinically detectable stage of AD, when symptoms become apparent to individuals affected by the disease, their loved ones, and their doctors, is called **mild cognitive impairment (MCI)**.^{5,6}

Timely detection of MCI provides the opportunity to diagnose AD at the stage when the disease has not yet progressed to dementia, and individuals can still perform activities of daily living (ADL) independently.⁷

IDENTIFYING MCI DUE TO AD

MCI due to AD is often underdiagnosed in clinical practice.⁸

Since MCI can result from multiple neurodegenerative pathologies and also some reversible/transient causes, the differential diagnosis between MCI due to AD and MCI due to other causes may be challenging.⁶

MCI can be defined as **amnesic (aMCI)** or **non-amnesic (naMCI)**, and can affect **one or multiple domains**. Episodic memory and executive function are often the first domains to be impaired in MCI due to AD. Moreover, mild neurobehavioural symptoms may also coexist.³

Individuals with MCI due to AD have subtle problems in one or more cognitive domains plus biomarker evidence of underlying AD pathology.^{5,6}



IS IT ALZHEIMER'S DISEASE OR NORMAL AGEING?

It can be difficult to distinguish early signs and symptoms of AD from the cognitive decline seen with normal ageing.⁶

Timely recognition of AD early signs and symptoms allows prompt referral to AD specialists and the possibility of a timely and accurate diagnosis of AD before onset of dementia.⁷



Explore the table on the next page to learn how to better distinguish AD from normal ageing →

References

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IS IT ALZHEIMER'S DISEASE OR NORMAL AGEING?

Cognitive Symptoms

Clinical hallmarks of MCI due to AD



Memory



Executive Function



Attention



Language



Visuospatial Function

Alzheimer's Disease¹⁻³

- Increasingly persistent forgetfulness of recent conversations, names, important events, or newly learned information
- Becoming increasingly repetitive, e.g. repeating questions after a very short interval, or repeating behaviours and routines
- Worsening ability to retrace steps and find misplaced objects that occurs more frequently over time

- Continually impaired judgment and decision-making, leading to difficulty solving problems
- Increasing difficulty following sequential tasks in social or work settings, like planning an event, working with numbers, or cooking a meal

- Regularly losing track of thoughts
- Impaired concentration and taking much longer to do things than before
- Decline in overall attention skills

- Difficulty with processing information, language interpretation, and communication, like stopping mid-conversation and not continuing
- Having trouble naming objects
- Struggling to follow a conversation

- Having difficulty judging distance, color, or contrast, leading to impaired perception of objects and faces
- Trouble with spatial relationships and confusion with time or place

Normal Ageing¹

- Simple forgetfulness, now and then, e.g. difficulties recalling a list of items to purchase at the grocery store
- Sometimes forgetting names or appointments, but remembering them later
- Losing things from time to time, but being able to retrace steps to find them

- Slight decline in problem-solving and reasoning about things that are less familiar
- Planning skills for everyday tasks remain normal, but can be slower when multitasking or when executing a new task

- Slight decline in the ability to concentrate and focus on specific stimuli, and to perform multiple tasks simultaneously, such as talking on the phone while preparing a meal

- Sometimes having trouble finding the right word
- Slight decline in verbal fluency

- Visuospatial abilities, like object perception and spatial perception, remain mostly intact
- Slight decline in perception of spatial orientation

Neurobehavioral Symptoms



Mood and Behaviour

Alzheimer's Disease¹⁻³

- Changing general behaviour, perception or personality, like becoming more easily upset in uncomfortable situations
- Acting more irritable, anxious, or experiencing low moods more frequently

Normal Ageing¹

- Developing very specific ways of doing things
- Becoming irritable when a routine is disrupted

Visit www.identifyalz.eu

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