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Medical interventions suppressed progression of advanced Alzheimer's disease more than mild Alzheimer's disease

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Abstract

Aim: Alzheimer's disease (AD) is the most common neurodegenerative disease. In 2000, Mendiondo et al. reported on a model predicting that AD progresses at an accelerating rate and cognitive function worsens rapidly. Recently, anti-AD drugs and non-pharmacological intervention have been established, but the effect of intervention is unclear and might depend on the stage of AD progression. Here, we examined the prediction of Mendiondo's model in patients with different severities of AD.

Methods: A total of 163 new outpatients with AD at four memory clinics were retrospectively analyzed. The Revised Hasegawa Dementia Scale (HDS-R) and Mini-Mental State Examination (MMSE) were administered to all AD patients at the first visit and after approximately 12 months. We divided the patients into three groups according to scores at the first visit: mild, moderate and moderate-to-severe. We compared the scores at the first visit with those obtained after 12 months of anti-AD drug and non-pharmacological interventions.

Results: The HDS-R score improved from 14.5 to 15.0, and the MMSE score improved from 18.8 to 19.1 after 12 months of intervention. Also, the HDS-R and MMSE scores at the first visit were significantly associated with the annual change in the scores. Among the three groups, lower HDS-R and MMSE scores at the first visit were associated with significantly greater annual improvement in the scores after 12 months of intervention.

Conclusions: Contrary to the prediction of Mendiondo's model, mild or moderate AD progressed more rapidly than moderate-to-severe AD under pharmacological and non-pharmacological interventions. *Geriatr Gerontol Int* 2020; 20: 324-328.

Keywords: Alzheimer's disease; Hasegawa Dementia Scale-Revised; Mini-Mental State Examination; non-pharmacological intervention.

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