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NEUROPSYCHOLOGICAL PERFORMANCE IN BOTH ALZHEIMER'S DISEASE AND VASCULAR DEMENTIA IS RELATED TO CARDIOVASCULAR COMORBIDITY

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Aims: Vascular pathology has been implicated in the pathogenesis of both Alzheimer's disease and vascular dementia. While performance decrements in vascular dementia are by definition thought to be related to vascular load, performance decrements in Alzheimer's disease have not yet been studied in relationship to cardiovascular comorbidity. The aim of this study was to describe neuropsychological performance in patients with mild Alzheimer's disease and vascular dementia in relationship to cardiovascular comorbidity.

Method: 39 patients suffering from vascular dementia and 34 patients suffering from Alzheimer's disease underwent neuropsychological testing using an extended neuropsychological battery, including tests of episodic memory, working memory, naming, verbal fluency, executive functions, and language. Cardiovascular comorbidity was assessed from medical history and chart review using the Charlson comorbidity index.

Results: Patients suffering from Alzheimer's disease and vascular dementia did not differ in terms of age, education, gender distribution, or dementia severity. Cardiovascular comorbidity was more pronounced in vascular dementia patients. In both Alzheimer's disease and vascular dementia, neuropsychological performance in tests of working memory and executive functioning was related to cardiovascular comorbidity, but the relationship was stronger in vascular dementia.

Conclusion: Vascular load affects neuropsychological performance in both Alzheimer's disease and vascular dementia, suggesting that cardiovascular comorbidity affects cognition across both forms of dementia.