APR 24, 2019

OPEN ACCESS

DOI:
dx.doi.org/10.17504/protocols.io.z97f99n

Protocol Citation: Laura Mcwhirter, Craig Ritchie, Alan Carson, Jon Stone 2019. Improving Diagnosis in Cognitive Disorders.
protocols.io
<https://dx.doi.org/10.17504/protocols.io.z97f99n>

MANUSCRIPT CITATION:

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Protocol status: Working
 This study is currently recruiting

Created: Apr 24, 2019

Last Modified: Apr 24, 2019

PROTOCOL integer ID:
 22559

Improving Diagnosis in Cognitive Disorders

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ABSTRACT

Functional cognitive disorders are likely to account for a significant proportion of adults presenting with cognitive (memory and thinking) symptoms which are not caused by neurodegenerative disease or structural brain lesions, incorporating those with isolated functional cognitive symptoms, those with primary psychiatric disorders, and those with health anxiety or who attend excessively to normal cognitive lapses. There is a need for improved diagnostic methods to identify those with functional cognitive symptoms so that they might be offered appropriate treatment, protected from iatrogenic harms, and also in order to improve the specificity of prodromal neurodegenerative disease phenotypes.

This study aims to identify elements of clinical, neurological, cognitive examination which can, in combination as part of a diagnostic scoring tool, accurately discriminate functional cognitive symptoms from those more likely to be due to neurodegenerative disease. The study will recruit 120 participants with mild or subjective memory symptoms (but not dementia) from memory, neurology, and neuropsychiatry clinics. Each subject will attend for a structured research assessment examining interactional, linguistic, metacognitive features, as well as psychiatric, physical, and sleep disorder comorbidity. Multiple outcomes will be compared with panel consensus diagnosis using discriminant factor analysis. The intention is to follow up medical record / general practice diagnosis at 1-2 years, and ultimately it is hoped that further studies beyond this will re-examine the cohort in the future.

ATTACHMENTS

[IDCD Protocol V2 26 March 2019.docx](#)

Keywords: Cognitive disorders, dementia, functional neurological disorders, diagnosis