(S121) NEUROPSYCHOLOGICAL ASSESSMENT OF MULTIPLE SCLEROSIS PATIENTS
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Background: Previous studies have shown that neuropsychological problems in multiple sclerosis (MS) patients can be detected only if specific testing is performed. Physical assessments such as the Expanded Disability Status Scale (EDSS) do not adequately uncover cognitive dysfunction in the MS population. This study was conducted to validate the use of the Symbol Digit Modalities Test (SDMT) in an MS center population as compared with the standard neuropsychological assessment performed by the neuropsychologist. Objectives: The oral and written SDMT administered to a random sample of MS patients with cognitive complaints seen at an MS center may be able to detect abnormalities when used as a screening tool. The SDMT could determine whether a standard neuropsychological assessment battery is necessary in identifying additional problems.

Methods: Seventy-five randomly identified patients were evaluated. Consenting patients completed a SDMT and had the MS center’s standard neuropsychological assessment performed. Tests making up the standard assessment were the Repeatable Battery for the Assessment of Neuropsychological Status (RBANS), Multiscore Depression Inventory (MDI), and Cross and Clock Drawings. The self-reported Beck Depression Inventory (BDI-II) and an EDSS were recorded for each patient. Scores more than 1.5 SDs below the mean are suggestive of cerebral dysfunction. The results were controlled for age, gender, and educational level. Additionally, the results of the 75 patient assessments were reviewed to determine the concordance between the results of the SDMT and the neuropsychological battery. Results: The strongest correlation was between the SDMT and RBANS total score. There were no correlations between the MDI, Clock Draw, or EDSS scores. Conclusions: The SDMT is a sensitive assessment that can be used in the MS center to detect cognitive changes in the MS population. It is a brief instrument that can be administered at the clinic visit and give the treating physician information on the cognitive status of the patient that can be further evaluated by more detailed neuropsychological testing. The SDMT can be repeated over time to confirm cognitive changes.

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