FREQUENCY OF MOVEMENT DISORDERS IN VASCULAR DEMENTIA

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Background: Although movement disorders that occur following a stroke and vascular dementia have long been recognised in short series of patients, their frequency and clinical features have not been reported in large series of patients with vascular dementia.

Methods: We reviewed consecutive patients with involuntary abnormal movements (IAMs) following a vascular dementia who were included in the out-patient Registry in Service of Neurology in UHC “Mother Teresa”, Tirana Albania, and they were followed up for at least three months after the onset of the IAM. We determined the clinical features and topographical correlations, of the IAMs.

Results: Of 56 patients with VaD 9 (16%) developed movement disorders up to three months after the VaD diagnosis. Patients with chorea were older and the patients with dystonia were younger than the patients with other IAMs. Deep vascular lesions showed a higher probability of developing abnormal movements. Three months after onset of the IAMs, 7 patients (77.7%) completely improved their abnormal movements, 1 patient (14.2%) partially improved, one did not improve (14.2%). In the nested case–control analysis, the patients with IAMs displayed a higher frequency of deep lesions (63% vs 33%; OR 3.38, 95% CI 1.64 to 6.99, p<0.001).

Conclusions: Chorea is the commonest movement disorder following VaD and appears in older patients. Involuntary movements tend to persist despite the functional recovery of motor deficit. Deep vascular lesions are more frequent in patients with movement disorders.