DOES A COMBINATION OF THE MINI-MENTAL STATE EXAMINATION AND CLOCK DRAWING TEST (MINI-CLOCK) IMPROVE DETECTION OF MILD ALZHEIMER'S DISEASE?

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The increasing prevalence and incidence of Alzheimer's disease (AD) and development of new disease-modifying treatments has fueled the research into development of accurate and easily administered screening instruments for AD. However, there is currently a need to develop tools to identify patients with mild AD. We determined the validity and reliability of a brief easily administered cognitive screening battery consisting of fusion of two well-known brief tests (Mini-Mental status examination [MMSE] and Clock Drawing Test [CDT]) (Miniclock) to differentiate between patients with probable mild AD and healthy control subjects. 66 consecutive patients with probable mild AD and 66 matched healthy controls seen in a memory clinic setting were compared. Receiver operating characteristic (ROC) curve analysis was used to calculate the cut-off value permitting discrimination between probable early AD and healthy control subjects. Interrater and test-retest reliability (correlation coefficients) were also assessed. Mean cognitive scores for patients with AD and control subjects on all 2 individual tests were significantly different (for each, P < 0.001). The mean area under the ROC curve for Mini-clock was higher than that obtained with MMSE or CDT (0.973 vs. 0.952 and 0.881, respectively). Test-retest reliability for the Mini-clock was 0.99, meanwhile interrater reliability was 0.87. The mean time to complete the test for all subjects was 8 minutes and 50 seconds. The Mini-clock is highly sensitive and specific to mild AD. It has a high interrater and test-retest reliability, can be quickly administered, and does not require major training.