

CONTROVERSY BETWEEN FRONTOTEMPORAL DEMENTIA, ALZHEIMER'S DISEASE AND MILD COGNITIVE IMPAIRMENT - LANGUAGE DIFFERENCES

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Background: Semantic dementia (SD) is a form of frontotemporal dementia (FTD) lobar degeneration in which deficits in language and visual perception represent the salient symptoms.

Objective: To investigate the prevalence of changes in mood, language and behavior in FTD and Alzheimer's disease (AD) comparative to mild cognitive impairment (MCI).

Subjects and method: We used brain MRI and neuropsychological tests to examine semantic aspects of language on 34 patients (mean age=64,5,20 men) with mild FTD (n=7) according to the criteria of the NINCDS-ADRDA, DSM-III-R, and ICD-10, Alzheimer's disease (AD) (n=14) and MCI (n=13). We used Western Aphasia Battery (WAB), Mini-Mental State Evaluation (MMSE), ADAS-Cog and Clinical Dementia Rating (CDR) scale. Anomic aphasia as slowly progressive language disturbance was one of the including criteria.

Results: All the patients present progressive impairment in naming. Patients with dementia were impaired in the number of words generated on both phonemic and semantic fluency. There was a significant association ($p < .0001$) between MMSE and CDR scores for all language measures, except hyperfluency. The left volumetric measures (amygdala, hippocampus, and parahippocampal gyrus) showed significant left sided hippocampal atrophy in most FTD patients (5 patients), also in Alzheimer patients (13 patients) and minor atrophy in MCI (4 patients).

Conclusions: FTD represents a neurodegenerative disease primarily affecting language function having the same diagnostic criteria as the early stage of Alzheimer's disease, except MCI patients. The patients with dementia forms had very similar behaviors, reflecting the involvement of a common network, the ventral frontal lobe, temporal pole, and amygdala.