

## **IS NORMAL COGNITIVE AGING CHANGING?**

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Definition of normality is a big challenge with aging. For numbers of biologic "normal range" published for geriatric patient in the 1980s, identification of diseases associated with aging leads to the conclusion that excluding pathologies give very different figures. Description of senile gait was attributed to normal aging and is attributed to sub-cortical vascular pathology. Can we make the same exploration for cognition?

We compare medical and cognitive evaluations made by medical students of elderly living in the community in the context of mandatory experiential learning activity during the first three years of medical curriculum in Sherbrooke in 1992 (n=80), 2006 (n=161) and 2012 (n=172)

For a mean age of around 77 years old, schooling increased from less than 10 years to more than 10 years and Folstein from 23 to 25 to 26. Using the MOCA we can see a relation with more deficits without dementia in the metabolic group even without stroke.

We compare our results to evaluation of other cohort and specific deficits attributed to aging, but that can be related to sub-cortical pathology.

Aging of Cognition is changing. Schooling plays a role. Metabolic syndrome including systolic hypertension both increasing with age can contribute to many changes in cognition attributed to aging. This opens the opportunity for prevention, not only for changing the rate of deterioration in dementia, but also for successful cognitive aging, and can be a good argument to motivate compliance to metabolic syndrome in adults.