

AMNESTIC VERSUS NON-AMNESTIC MILD COGNITIVE IMPAIRMENT IN GREEK PATIENTS WITH IDIOPATHIC TRIGEMINAL NEURALGIA

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Background: Cognitive impairment has been associated with chronic pain. Few studies have related trigeminal neuralgia with cognition deficits.

Objective: To evaluate cognitive functions in patients with idiopathic trigeminal neuralgia (TN) in association of possible effects of treatment.

Methods: This three-year study concerns 12 Greek patients with idiopathic trigeminal neuralgia, 50- 75 years of age (5 male and 7 female) , which were compared with a group of healthy participants, matching in terms of age, number and gender considered as a control. Subjects with depression or preexisting cognitive disease were excluded. Both groups were evaluated four times annually by the Mini Mental State Examination and the Brief Repeatable Battery of Neuropsychological Tests in order to estimate psychomotor speed, reaction time, complex attention and executive functioning. The revised Petersen criteria were used to diagnose mild cognitive impairment (MCI). Correlation with treatment was also undertaken.

Results: The TN group fulfilled mainly the criteria for *non-amnestic* MCI rather than the amnestic type. MCI was more common among the older patients. Furthermore a notable, statistical significant difference was also observed between patients and controls. Various treatments seemed to have diverse effects on cognitive status. In the analysis of the raw scores on cognitive tests between the subject groups, there was concern due to the small sample size.

Conclusion: Cognitive dysfunction appears to be correlated with trigeminal neuralgia. This must be taken in consideration when treating TN, since it may have a essential role in outcome and quality of life.