

Multiple System Atrophy: cognitive impairment and comparison to Parkinson's Disease

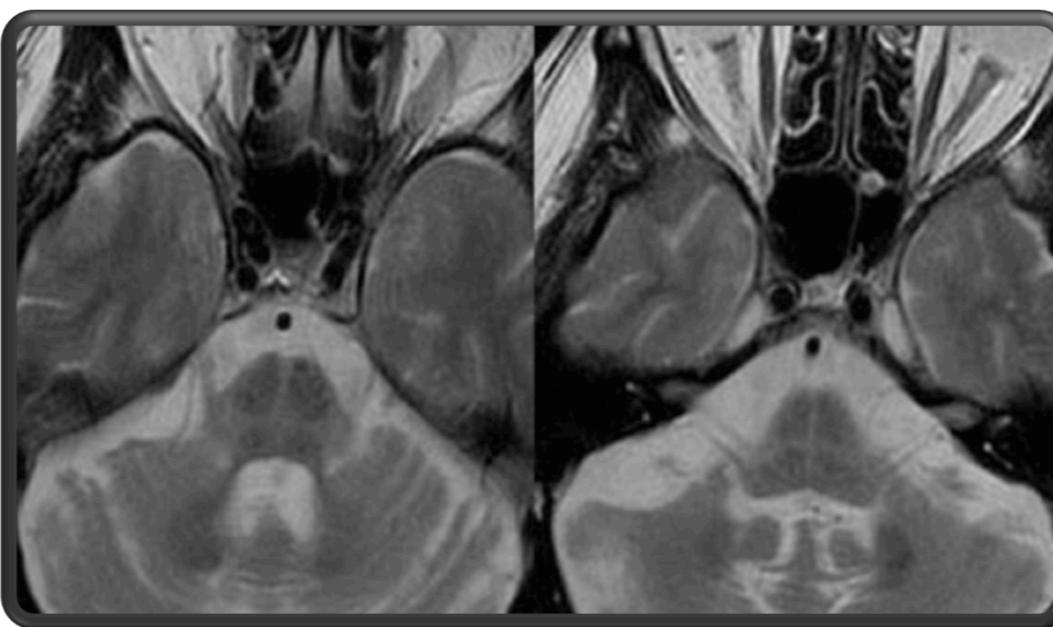


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Multiple System Atrophy

- neurodegenerative disorder
- parkinsonism
- cerebellar impairment
- autonomic dysfunction



COGNITIVE IMPAIRMENT (CI) COULD BE A CONSISTENT MSA FEATURE?

MSA AND PD PATIENTS HAVE DIFFERENT COGNITIVE ABILITIES?

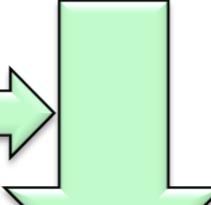


10 Multiple System Atrophy (MSA) patient

10 Parkinson disease (PD) patients

10 healthy controls (HC)

➤ Pata Rate



➤ 9 Hole Pegboard Test

Neuropsychological battery

Global Evaluation: Montreal Cognitive Assessment

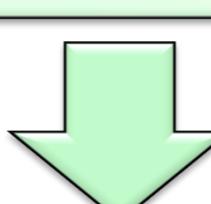
Language: Naming nouns and Pointing

Intelligence: Raven's Colored Progressive Matrices

Executive Function: Symbol Digit Modalities Test, Trail Making Test, Phonemic and Semantic fluencies, Attentional Matrices

Memory: Digit span, Modified 10/36 spatial recall test, Rey's auditory verbal learning test

Visuospatial Function: Segment length discrimination, Mental rotation



MSA, PD and HC were comparable for age, sex distribution, and education

MSA

MoCA ($p=0.002$),
Ray's short term memory ($p=0.004$)
Semantic fluencies ($p=0.014$)
Attentional Matrices ($p=0.01$)
Trail Making Test B ($p=0.030$)
Symbol Digit Test ($p=0.006$)



HC

MSA PATIENTS SHOWED A RELEVANT CI CONCERNING EXECUTIVE FUNCTIONS, SHORT-TERM MEMORY, AND GLOBAL FUNCTIONING

MSA
MoCA ($p=0.046$)



PD

AT GLOBAL ASSESSMENT MSA SHOWED GREATER CI THAN PD.

PD
Symbol Digit Test ($p=0.008$)



HC

PD PATIENTS, DESPITE A LONG PERIOD OF ILLNESS, HAVE LIMITED CI IMPAIRMENT, WITH EXCLUSIVE ALTERATION OF THE SYMBOL DIGIT MODALITIES TEST

Bibliography

- Siri C, Duerr S, Canesi M, et al. A cross-sectional multicenter study of cognitive and behavioural features in multiple system atrophy patients of the parkinsonian and cerebellar type. *J Neural Transm* 2013; 120: 613–618
- Dujardin K, Defebvre L, Krystkowiak P, Degreef JF, Destee A. Executive function differences in multiple system atrophy and Parkinson's disease. *Parkinsonism Relat Disord* 2003; 9: 205–211

Test	K-W (p)	HC	MSA	CNTRL vs MSA (p)	PD	CNTRL vs PD (p)	MSA vs PD (p)	
Moca	0.002	24,9±2,8	19,1±3,2		0.004 22,3±2,5		0,144	0,044
Raven	0,148	29,9±3,2	24,6±5,9		NP 24,1±6,6		NP	NP
Naming	0,737	14,3±0,8	14±1,5		NP 13,5±1,7		NP	NP
Pointing	0,317	23,9±0,3	23,6±0,8		NP 24±0		NP	NP
DigitSpan	0,807	5,2±0,8	5,3±0,8		NP 5,1±0,7		NP	NP
ReyImm	0.011	39,7±6,4	28,9±5,5		0.006 34,8±9		0,258	0,240
ReyDiff	0,594	8,3±3,2	6,6±2,4		NP 7,9±2,9		NP	NP
T036Imm	0,209	20,7±5,1	16,7±5,9		NP 18,7±4,8		NP	NP
T036Diff	0,131	7,4±2,4	5,4±2,6		NP 6,5±1,6		NP	NP
Fonemic Fluency	0,061	38,2±14,9	22,5±12,8		NP 29,2±9,8		NP	NP
	0,075							
Fonemic Fluency Corrected		38,2±14,9	23,2±13,3		NP 29,2±9,8		NP	NP
Semantic Fluency Raw	0.021	21,725±4,9	14,275±4,3		0.008 18,4±6,4		0,380	0,302
Semantic Fluency Corrected	0,039	21,7±4,9	14,4±4,8		0,018 18,4±6,4		0,380	0,398
Attentional Matrices Raw	0,001	55,5±3,9	34,8±16,5		0,002 52,6±5,2		0,186	0,014
Attentional Matrices Corrected	0,016				0,012 52,6±5,2			
TMT-A	0,004	41,5±17,9	108±67		0,006 47,5±26		1,000	0,016
TMT-A corretta	0,115	56,4±25,2	79,9±35,5		NP 55,0±24,2		NP	NP
TMT-B	0,001	104,6±36,2	315,4±134,3		0,002 164,4±112,3		0,346	0,038
TMT-B corretta	0,500	104,6±36,3	253,1±107,2		NP 164,4±112,4		NP	NP
SDMT	0,002	40,5±8,2	24,3±6,7		0,006 28,2±8,3		0,012	0,424
SDMT corretto	0,004	40,5±8,3	25,0±8,9		0,010 28,2±8,4		0,012	0,614

Comparison between the groups of patients analyzed with the Kruskal-Wallis Test and post-hoc analysis with the mann-Whitney

SD = standard deviation, Moca =Montreal Cognitive Assessment, FF = Fonemic Fluency, FS = Semantic Fluency, MA = Attentional matrix, TMT = Trail Making Test, SDMT = Symbol Digit Modalities Test

Group (n,%)			
Test	MSA	PD	Control
Immediate Recall	6 (60%)	4 (40%)	1 (10%)
Semantic Fluency Raw	5 (50%)	2 (20%)	0%
Semantic Fluency Corrected	4 (40%)	2 (20%)	0%
Attentional Matrices Raw	5 (50%)	0%	0%
Attentional Matrices Corrected	2 (20%)	0%	0%
Trail Making Test A	6 (60%)	1 (10%)	1 (10%)
Trail Making Test B	7 (70%)	2 (20%)	1 (10%)
Symbol Digit Modalities Test Raw	10 (100%)	7 (70%)	3 (30%)
Symbol Digit Modalities Test Corrected	10 (100%)	7 (70%)	3 (30%)

Number of patients and controls with impaired test results

THESE EVIDENCES RAISE THE POSSIBILITY THAT CI MAY CONTRIBUTE TO THE CLINICAL SPECTRUM OF MSA TO A GREATER EXTENT THAN IT IS CURRENTLY THOUGHT.