

NHM

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## Effect of ETAS in pre-dementia cognitive disorder in young age

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Background & Aims: Young Onset Dementia (YOD) is the term used to de ne the cognitive disorder in the persons under 65. YOD is grown with age. In the age of 30-44, 1 of 1,500 su ers from dementia, in the age of 45-64, 1 of 750. Clinical signs YOD are more variable than at Old Onset Dementia (OOD). ese are depression, apathy, anxiety, sleep disorder. ey are not associated with cognitive de cit. Assessment at YOD di ers from OOD and includes collection of information of the patient and his family, neurological status, the more wide range of cognitive disorder assessment and neuroimaging. e aim is to research e ect of ETAS on the major non-cognitive disorder in young patients with early dementia.

Methods: 12 patients (6 men and 6 women) of 44-62 with early dementia were assessed. e patients were divided in three groups according to the leading symptom: (1) 4 persons (33.3%) with depression and apathy, (2) 4 persons (33.3%) with asther anxious disorder and (3) 4 persons (33.3%) with expressed sleep disorder. Neurological status was assessed, neuropsycholog testing, MRI (brain, cerebral and neck vessels) were performed before and a er treatment. All patients received ETAS (1,000 m per a day, in the evening) for 12 weeks.

Results & ConclusionAccording to the study results the best response to the therapy was shown by the sleep disorder and anxiety group (72%), the major symptoms were reversed, the cognitive functions were improved. It means that at a ectivity reduced (mood is normalized) cognitive facilities are increased. e less e ect was shown by the patients with depression (40%), maybe, the more long treatment is required. ETAS is recommended at early dementia for timely correction of non-cognitive disorder as a medication improving higher cortical functions, emotional sphere, personal psychological constitution and neurophysiological measures in the whole.

## **Biography**

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