

Relationship between depressive symptoms, subjective cognitive complaints, and objective cognitive performance in older adults.

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Introduction

Cognitive complaints are a common reason for consultation, especially among older adults. These complaints may correspond to Mild Cognitive Impairment (MCI) or dementia, depending on the level of functional impact. In some cases, however, cognitive performance remains within normal limits. This condition is referred to as Subjective Cognitive Complaint (SCC). SCC has been linked to an increased risk of cognitive decline and is often associated with neuropsychiatric symptoms. This study explored the relationship between depressive symptoms, cognitive test performance, and self-reported cognitive complaints in older adults with SCC and MCI (amnesic and non-amnesic subtypes).

Methods

We conducted a cross-sectional study analyzing 94 neuropsychological reports of individuals aged ≥ 60 years who consulted for cognitive complaints between January and March 2025. Based on standard neuropsychological evaluation, participants were classified into three groups: SCC (n=35), amnesic MCI (n=16), and non-amnesic MCI (n=43). Assessments included the Mini-Mental State Examination, a comprehensive cognitive battery (covering memory, attention, executive function, visuospatial skills, and language), the Cognitive Complaint Questionnaire (CCQ; total and domain scores), and the Beck Depression Inventory-II (BDI-II).

Results

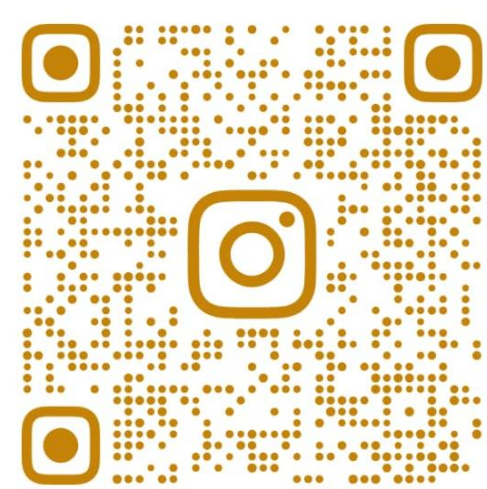
Variable	Subjective Cognitive Complaint (n=35)	Amnesic MCI (n=16)	Non-amnesic MCI (n=43)	P-value
Age, median [IQR]*	70 (63–75)	79 (72–83)	75 (70–81)	0.0012
Education, median (IQR)*	16 (14–18)	12 (12–18)	12 (12–16)	0.0277
Biological sex, % female**	54.3%	56.2%	62.8%	0.7351
Mini Mental State Examination, median (IQR)*	29 (28–30)	25 (25–28)	26 (25–28)	<0.0001
Beck Depression Inventory-II, median (IQR)*	11 (6–19)	13 (11–19)	12 (7–16)	0.6709
Cognitive Complaint Questionnaire scores, median (IQR)*	24 [IQR: 10–33]	32.5 [25–43]	25 [16–36]	0.11

Table 1. Demographic characteristics, cognitive performance, and neuropsychiatric symptoms across groups. * Kruskal–Wallis test; *** Chi-square test. IQR, interquartile range. Bold values indicate statistical significance

Conclusions

In our study, **cognitive complaints** were more **closely related to depressive symptoms** than to actual cognitive deficits. These findings underscore **the importance of mood and emotional assessment** in addressing cognitive concerns in older adults and highlight the need to integrate psychiatric screening into cognitive diagnostic protocols.

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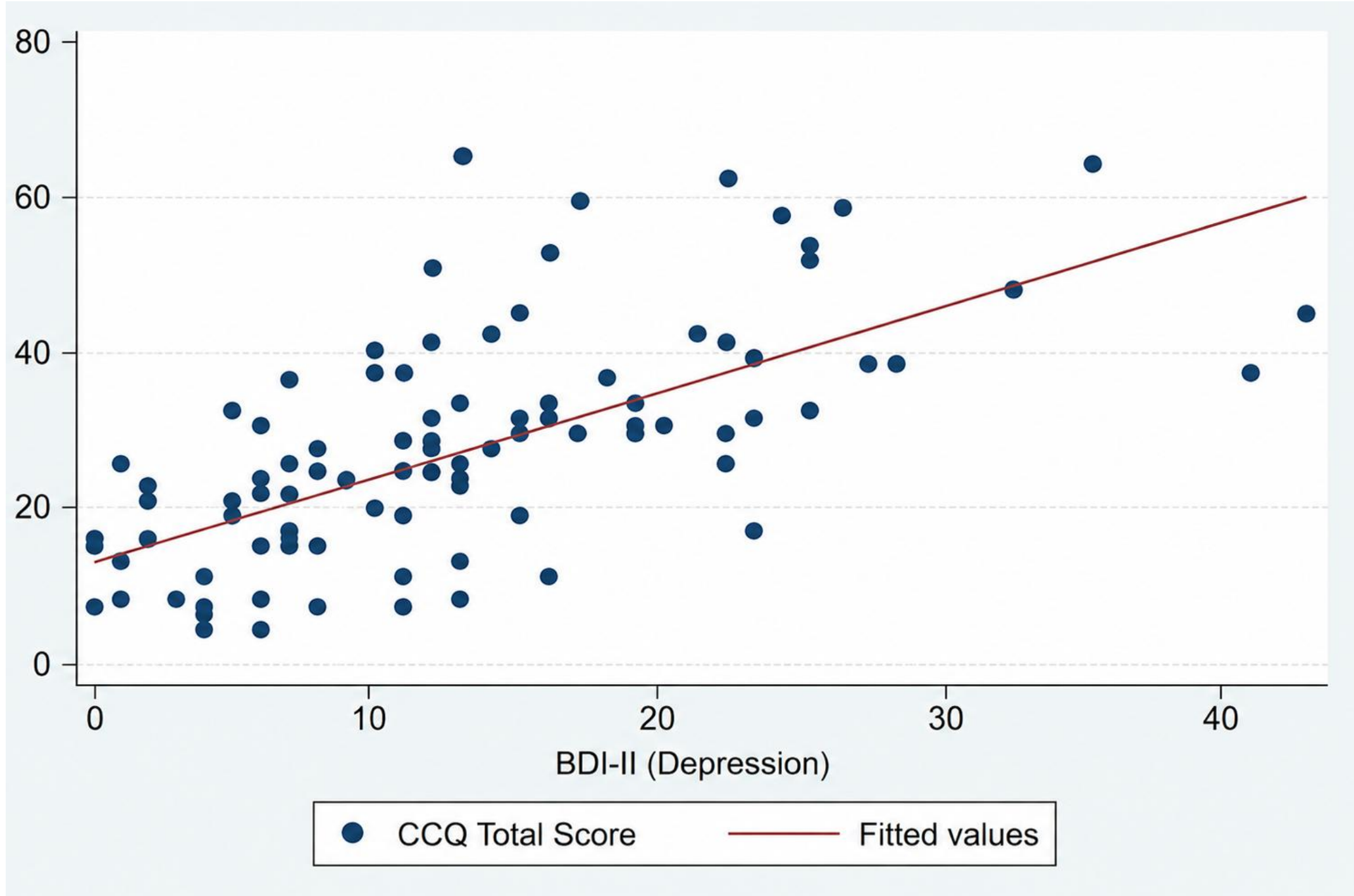


Figure 1. Correlation between depressive symptom severity, as measured by the Beck Depression Inventory-II (BDI-II), and total Cognitive Complaint Questionnaire score. Spearman's correlation coefficient ($\rho = 0.6928$).

No significant associations were found between domain-specific CCQ scores and objective cognitive performance-

References

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