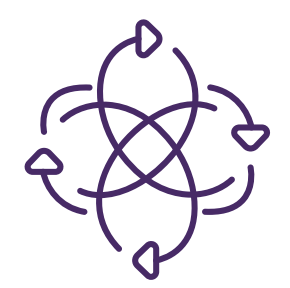


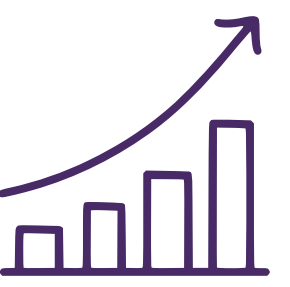
Geriatric Syndromes in Mexicans with Alzheimer’s Disease and Frontotemporal Dementia

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Background:



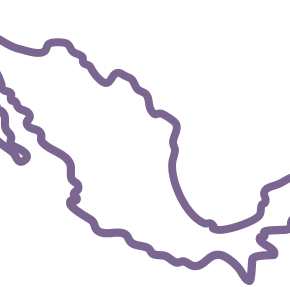
Geriatric Syndrome: multifactorial and associated with multiple clinical outcomes



Increase: morbidity, mortality and health care utilization.



People living with dementia (PLwD) even in early stages, have greater vulnerability



Gap in Mexico:
PLwD could have a higher prevalence of Geriatric Syndromes, despite their cronological age.

Aims:

To determine the frequency of geriatric syndromes in individuals with mild-to-moderate Alzheimer's disease (AD) and frontotemporal dementia (FTD) compared with cognitively unimpaired controls

Methods:

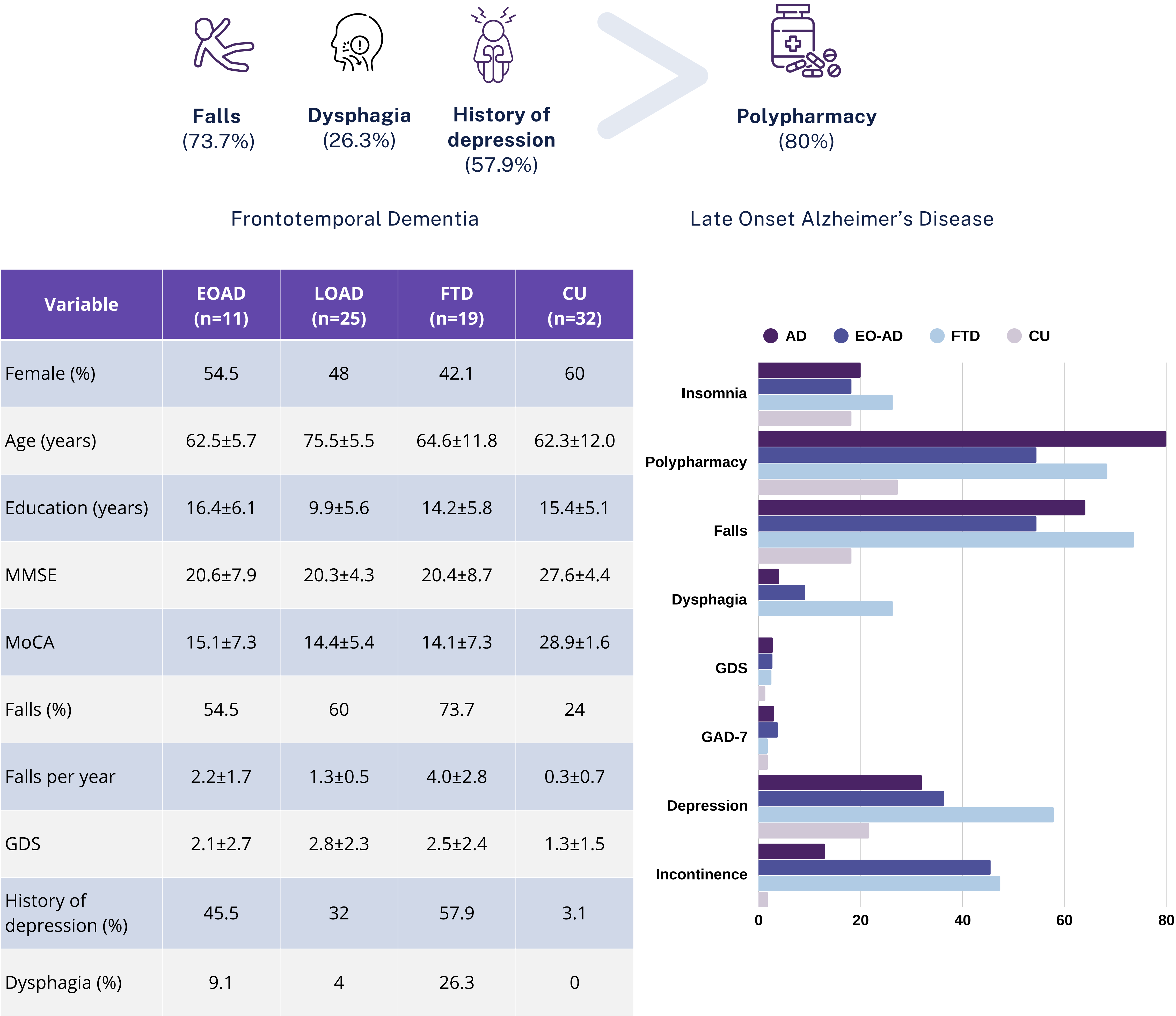
Cross-sectional study, derived from the ReDLat cohort, 87 people were included, of which 24 were typical AD, 11 atypical AD (APP logopenic:1; CBS: 1, PCA: 1, Frontal:1); 19 FTD (Behavioral: 11, Agrammatic: 1, Semantic: 1, ALS: 2, Prodromic: 3) and 33 cognitive unimpaired.

A comprehensive geriatric assessment and a standardized cogntive battery were performed.

Results:

Typical AD participants were older and less educated than those with FTD. Cognitive performance was similar between AD and FTD (MMSE ≈20; MoCA ≈14). FTD showed the highest prevalence of geriatric syndromes, particularly falls (73.7%) and dysphagia (26.3%). Although depressive symptom scores were higher in AD, a history of depression was more common in FTD (57.9% vs. 32.0% in AD).

Results:



Conclusion:

Geriatric syndromes are frequent in dementia, in this sample, the atypical presentations of AD and FTD presented a greater number. Therefore, geriatric syndromes should be known and questioned by all clinicians dealing with dementia patients in their daily practice. Moreover, working with geriatricians will increase success in managing people living with dementia.

