

07q. Epidemiology, Risk Factors, Genetics & Epigenetics: other

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NEUROPHYSIOLOGIC EVALUATION OF DEPRESSION AND DEMENTIA IN POST STROKE ELDERLY PATIENTS

D. Petrovska Cvetkovska¹, N. Dolnenec Baneva¹, A. Taravari¹, G. Novotni¹

¹Neurology, University clinic for neurology, Skopje, Macedonia

Objective: To evaluate the influence of brain lesion localization as a risk for depression and dementia in post stroke patients (PSP). Material and methods: The study was prospective, randomized, in duration of 1 year, and included post stroke patients diagnosed and treated at the Department for Cerebrovascular Diseases. The patients were evaluated by means of the NIH Stroke Scale, Mini-Mental State Examination, Barthel Index, modified Rankin Scale, and MOS-Short Form 36. The evaluation period was 1, 3, 6 and 12 months after stroke. Results: Sixty eighth stroke survivors were assessed (mean age: 61.2 years; 52.2% males). The m-RS score ≤ 2 , had 51.2% of the PSP had an m-RS score ≤ 2 . The prevalence of depression and vascular dementia was significantly higher in females than in males (24.6 vs. 14.4%; χ^2 , $p = 0.03$). Elderly patients had significant worst MMSE and Bartel changes. The evaluation period showed the biggest changing 6 months after stroke. Post stroke dementia and depression was significantly associated ($p < 0.0001$) with education level, lower social and cognitive functioning, dependence in the instrumental activities of daily living and presence of diabetes in the multivariable regression analysis (R adjusted = 0.34). The relative risk of depression after a left-hemisphere stroke, compared with a right-hemisphere stroke, was 0.94 (95% CI 0.73-1.11). Conclusions: Post stroke dementia and depression was highly prevalent in the chronic phase of stroke. Early detection and recognition of associated risk factors is important to treat and prevent depression and dementia, in a rehabilitation setting.