NACC Project #2010-JI-01 (Secondary Analysis of NACC data)
“Common Functional Deficits in MCI and Dementia”

Junior Investigator
Patrick Brown, PhD, Columbia University

ADC Director
Michael Shelanski, MD, PhD

Project Work Dates
2010-2011

Project Description
This National Alzheimer’s disease Coordinating Center (NACC) Junior Investigator Award proposal for the FY2010 focuses on the everyday functional abilities of individuals with cognitive impairment. The loss of functional abilities for those individuals with cognitive impairment is a progressive process that is part of a larger degeneration that occurs with illnesses such as dementia and more specifically, Alzheimer’s disease. Although Mild Cognitive Impairment, a term used to identify the intermediate phase between cognitively normal and demented older adults, was believed to be a phase with intact daily functioning, research has shown subtle deficits in instrumental activities of daily living illustrating that functional deficits are early markers for cognitive degeneration. Because of the effect that functional deficits in everyday living can have, it is imperative that its role in the dementia process be better understood: What are the most prevalent functional deficits that mark the earliest stages of cognitive impairment and do these deficits predict conversion to dementia? To begin to address these issues, the proposed study has three goals: 1. To identify a subset of deficits in everyday functioning that differentiates cognitively intact healthy older controls from older adults with cognitive impairment, 2. To evaluate over a four-year follow-up period if this subset of functional impairments predicts cognitive and functional decline and conversion to dementia, and 3. To evaluate the physical, cognitive, and psychiatric correlates of functional impairment as well as the relationship between APOE4 status and function. This project will benefit clinicians and practitioners by providing them with a set of discrete behaviors that: 1. Are easily assessed by patients and family members, requiring less than five minutes to assess in the office, 2. Accurately differentiate normal aging from the MCI stage, and 3. Promote earlier identification of clinically relevant symptomatology, thereby allowing for the development and future implementation of tailored treatments designed to maintain time living independently, resulting in higher quality of life for patients with cognitive impairment.

Contact Information
For further information regarding this study, please contact:
   Patrick Brown, PhD
   Columbia University
   email: pb2410@columbia.edu
   ADC website: http://www.alzheimercenter.org

Rev. 4/13/2010