

Poster presentation

Assessment of personality changes in dementia of the Alzheimer's type and frontotemporal dementia

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Background

Personality changes occur in the course of many dementive illnesses, in addition to disturbances of cognitive processes. In the literature, however, there is no model that would explain the nature, direction, and dynamics of these changes. Cognitive deterioration in these patients is accompanied by loss of insight regarding personality changes. This is the reason why the majority of methods available on the market to study personality, though highly accurate and reliable, are not suitable for the evaluation of these changes. The purpose of this research was to describe the nature, direction, and dynamics of personality changes in persons with a clinical diagnosis of dementia of the Alzheimer type (DAT) and fronto-temporal dementia (FTD).

Materials and methods

Case histories. Patient BM (62 years old) has been clinically diagnosed with DAT, and patient CM (49 years old) with FTD. Both men fulfill the respective ICD-10 criteria, and have neuropsychological profiles of cognitive function disorders, supported by computerized tomography (CT) or magnetic resonance imaging (MRI).

Methods. Neuropsychological screening tests were used to measure overall mental functioning, attention, memory, visuospatial functions, speech and language, executive functions and personality. A set of questions from the International Personality Inventory Pool (IPIP) in the authorized Polish version (IPIP-QPv) was used to assess personality; the questionnaires were filled out by the

patient himself and by the primary caregiver. The studies were performed twice at four-month intervals.

Results

The results given by the caregivers and the patients are more consistent in the first examination, while in the second there appeared major discrepancies, reflecting the loss of insight by the patient. The results obtained on the IPIP-QPv from the caregiver indicate that in the case of patient BM, cognitive deterioration is accompanied by a decrease in the dimension of Extraversion, while in the case of patient CM the situation is reversed.

Conclusions

Personality changes were observed in both patients described here. These changes depend on the pathomechanism and localization of the changes in brain tissue, and on the patient's premorbid personality. The IPIP-QPv is a suitable instrument for the evaluation of the nature, direction, and dynamics of personality changes in the estimation of the caregivers, and for assessing the level of insight regarding these changes in the patients themselves.