## Neuropsychiatric profiles in patients with Alzheimer's disease and vascular dementia

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Went through with interest an article entitled "Neuropsychiatric profiles in patients with Alzheimer's disease and vascular dementia" published in Ann Indian

Acad Neurol (2014;17:325-30).<sup>[1]</sup> Given the fact that neuropsychiatric symptoms are common both in patients with Alzheimer disease (AD) and those with vascular dementia (VaD),<sup>[1]</sup> the study has highlighted an important

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issue and authors deserve credit for that. However, I have a few concerns with the methodology as described by the authors. The authors state that they used the mini-mental status exam (MMSE) for initial screening. They also used the Kolkata Cognitive Test Battery as also separately tested the language, praxis performance, executive functioning, as well as visuospatial and visuoperceptual functioning using standard methods. The authors claim that they based their diagnosis of dementia using Diagnostic and Statistical Manual of mental disorders. The authors further assessed behavioral and psychological symptoms on the basis of the NPI in the presence of a reliable caregiver. The authors translated the original NPI in to Bengali and used the same after following a standard technique.

Now this takes me to my concerns with this study. I am unable to understand the role of MMSE in this study. MMSE or its modifications have in past been used as a screening tool in a two phase surveys for assessment of dementia.[2-4] As a screening tool it has been used to pick suspects of dementia and further evaluation has been carried on suspects to confirm cases of dementia. Further a random sample of screen negatives is selected for second phase assessment. This does not seem to have been done in this study. If this was done, then what was the need of using MMSE as a screening tool? The study seems to have been conducted as a one-phase cross-sectional study after applying dementia criteria from Diagnostic and Statistical Manual of mental disorders (DSM-IV). Further, even if the authors have used MMSE for screening (as they claim), they have been unable to report on how MMSE was made culturally and linguistically sensitive to the population under study. It may not be appropriate to use MMSE (English language) in the study population. The authors seem to be aware of this and that is why they have translated and validated their study tool for assessment of behavioral and psychological symptoms. Should not the same be done with the screening tool for assessment of dementia?

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