



Geriatric Cognitive Function Assessment for Physiotherapists























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Lecture outcomes

- Understand the importance of early cognitive screening in older adults
- Recognize the role of physiotherapists in identifying and managing cognitive impairments
- Describe the prevalence and burden of dementia, especially in South Asia and Sri Lanka
- Identify and differentiate commonly used cognitive screening tools (e.g., MMSE, MoCA, Mini-Cog, TMT, ACE)

























Importance of Cognitive Assessment in Geriatrics

- 1. Early detection of cognitive decline
- 2. Plan treatments based on the individual's cognitive abilities
- 3. Prevention of complications associated with cognitive impairments
- 4. Enhance compliance with rehabilitative exercises
- 5. Support caregivers in communication techniques and safety measures
- 6. Monitor the progression and improvement of cognitive functions

























Role of the Physiotherapist in Early Identification and

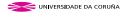
Management of Cognitive Impairments

- 1. Cognitive screening during routine assessments
- 2. Integrating cognitive elements into the treatment plan
- 3. Refer identified cognitively impaired patients to specialists

























Prevalence of Cognitive Impairment and Dementia in Older

Adults

- Global Dementia Prevalence (2023)
 - Over 55 million people are living with dementia
 - Nearly 10 million new cases annually
 - The global prevalence in people aged 60 and above is estimated to be around 5–8%
- Higher Prevalence in South Asia Compared to Global Averages
 - South Asian countries generally show higher prevalence rates due to underdiagnosis, limited awareness, and fewer healthcare resources
 - A meta-analysis estimated dementia prevalence in South Asia to be 6.5–10% in adults over 60

























- Sri Lanka's Dementia Prevalence Exceeds Regional Averages
 - Sri Lanka shows dementia prevalence rates of around 11.8% in some studies
- Faster Aging in Sri Lanka Elevates Risk
 - Sri Lanka is among the fastest-aging countries in South Asia
 - By 2050, nearly one in four Sri Lankans will be over 60
 - This will significantly increase the national dementia burden compared to many other lowand middle-income countries















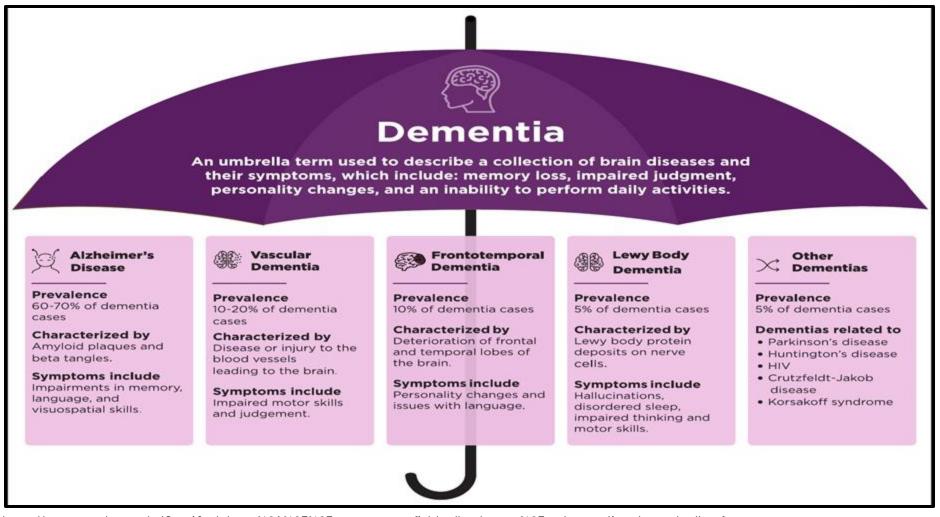


























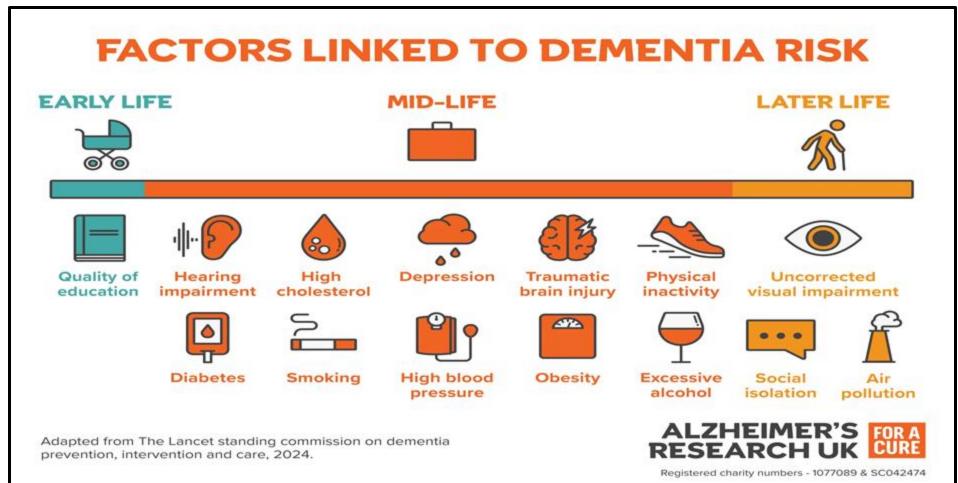


























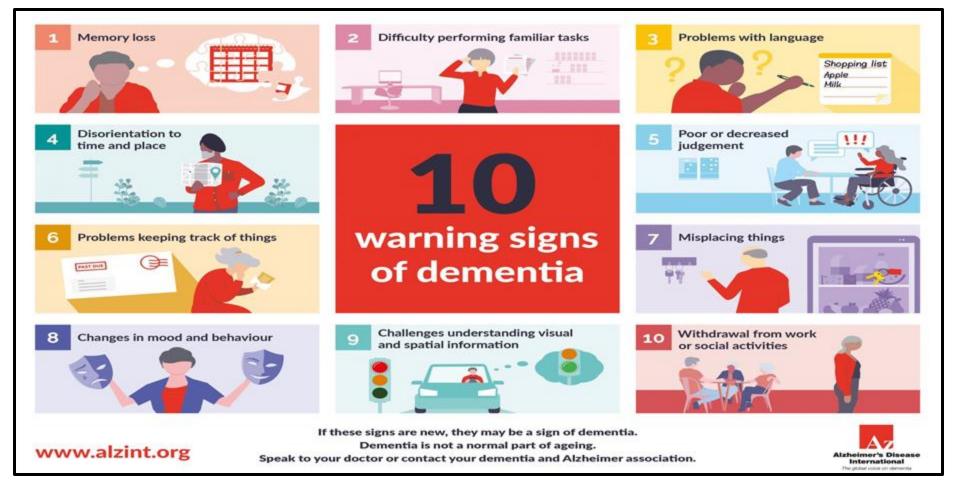
































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7 Stages of Dementia

No Cognitive Decline No noticeable symptoms or memory problems

> **Very Mild Cognitive Decline** Subtle memory lapses, generally not detected

Mild Cognitive Decline 3 Increased forgetfulness, slight concentration problems

> **Moderate Cognitive Decline** Clear-cut memory loss, difficulty with complex tasks

Moderately Severe Cognitive Decline

Assistance with daily activities often needed

Severe Cognitive Decline

Significant memory issues, personality changes

Very Severe Cognitive Decline

Loss of verbal abilities, total dependence on caregivers







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Image source: https://www.nccdp.org/understanding-the-seven-stagesof-dementia-a-guide-for-caregivers-and-professionals/

















Principles of Cognitive Assessment

- 1. Holistic Approach
 - Assess multiple cognitive domains
 - Memory, attention, language, executive function, visuospatial and spatio-temporal orientation abilities
- 2. Use of standardized tools
 - Employ validated screening instruments to ensure consistency and reliability
- 3. Consideration of baseline function and education
 - Interpret results in the context of the individual's premorbid abilities, education level, and cultural background to avoid misdiagnosis due to normal aging or low literacy
- 4. Early detection and monitoring
 - Aim for early identification of cognitive decline and track changes over time
- 5. Incorporation of functional impact
 - Assess how cognitive changes affect daily activities

























Cognitive Screening Tools Overview

- Choose tools with high sensitivity and specificity
- Tools for use in clinical practice
 - Min-Cog Assessment Tool
 - 2. Montreal Cognitive Assessment (MoCA)
 - 3. Mini-Mental State Examination (MMSE)
 - 4. Trail Making Test (TMT) Part A & B
 - 5. Addenbrooke's Cognitive Examination (ACE)
- These tools can be effectively used in outpatient clinics, inpatient wards, rehabilitation centers, and even during home visits











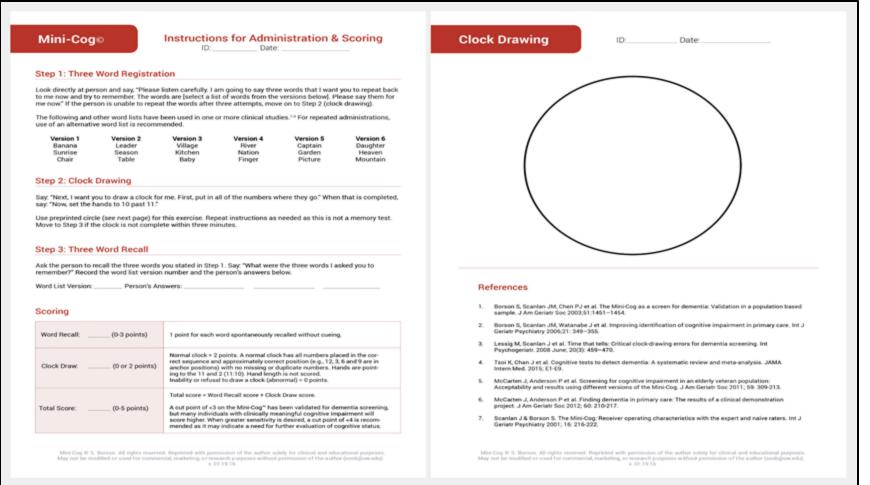






SCAN ME

Min-Cog Assessment Tool

































Montreal Cognitive Assessment (MoCA)

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(MIS)	X1	Multiple choice	cue							M12 =	MIS =/15		
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Read list of letters. Th	e subj	ect must tap wi	th his han	d at each l					AKDEA	A A J A M O F A	AB	_/1	
Read list of digits (1 digit/sec.). Subject has to repeat them in the backward order. [] 2 4 8 1 5 Subject has to repeat them in the backward order. [] 4 2 7									_/:				
ATTENTION	4		2.27					a la tha da a		[] 0 4 0			
Do a recall after 5 minutes.			131	t TRIAL					-		POINTS		
MEMORY repeat them. Do 2 tria	Read list of words, subject must Do 2 trials, even if 1st trial is successful.					LE	:G	COTTON	SCHOOL	TOMATO	WHITE	NO.	



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Mini-Mental State Examination (MMSE)

725		Date
Score		
	Orientation	
()	What is the (year) (season) (date) (day) (month)?	
()	Where are we (state) (country) (town) (hospital) (floor)?	
	Registration	ot.
()	all 3 after you have said them. Give 1 point for each c Then repeat them until he/she learns all 3. Count trial Trials	orrect answer.
	Attention and Calculation	
()	Serial 7's. 1 point for each correct answer. Stop after 5 a Alternatively spell "world" backward.	nswers.
	Recall	
()	Ask for the 3 objects repeated above. Give 1 point for each	h correct answer.
	Language	
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2.3		
1.1		
	50.0	() Where are we (state) (country) (town) (hospital) (floor)? Registration () Name 3 objects: 1 second to say each. Then ask the patiet all 3 after you have said them. Give 1 point for each of Then repeat them until he/she learns all 3. Count trial Trials Attention and Calculation () Serial 7's. 1 point for each correct answer. Stop after 5 at Alternatively spell "world" backward. Recall () Ask for the 3 objects repeated above. Give 1 point for each

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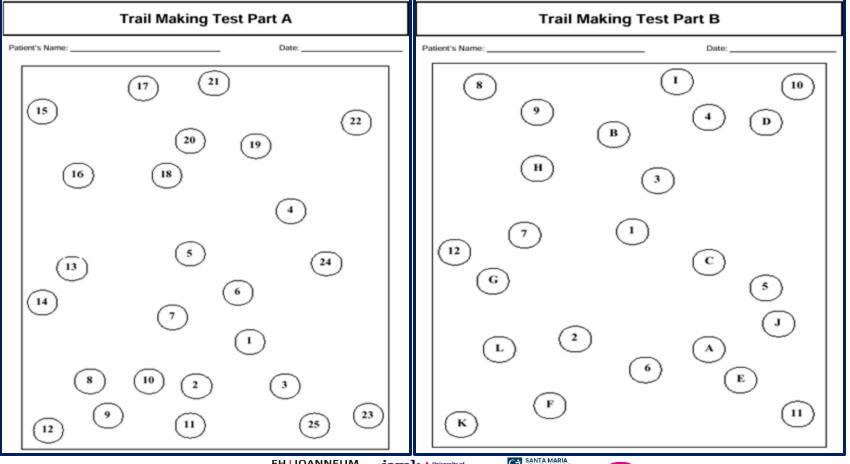
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Trail Making Test (TMT) Part A & B



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Addenbrooke's Cognitive Examination (ACE)

ADDENBROOKE'S COGNITIVE EXAMINATION - ACE-III English Version A (2012)									
Name: Date of Birth: Hospital No. or Address:						Date of testing:/ Tester's name: Age at leaving full-time education: Occupation: Handedness:			
AT	TENTION				rianoed	1411			
-	Ask: What is the	Day	Date	Mont	h	Year	Season	Attention	
*	Ask: Which	No./Floor	Street/Hospital	Mospital Town		County	Country	Score 0-5]	
				I —				[Score 0-5]	
	TENTION			_					
A AA	Tell: "I'm going to gi After subject repeat Score only the first t Register number of	s, say "Try to re trial (repeat 3 to	member them be	cause			, key and ball."	Attention [Score 0-3]	
AT	TENTION								
Ask the subject: "Could you take 7 away from 1007 ind like you to keep taking 7 away from each new number until i fell you to stop." If subject makes a mistake, do not stop them. Let the subject carry on and check subsequent answers (e.g. 93, 84, 77, 70, 63 – score 4). Stop after five substactions (93, 86, 79, 72, 65):									
MA E	MORY								
	Ask: Which 3 wor	ds did I ask y	ou to repeat and	d reme	mber?'			Memory [Score 0-3]	
FL	UENCY								
beg	Letters: "I'm going to give you inning with that letter id give me words like you understand? Are	but not name 'cat, cry, clock	of people or plant and so on. But,	ces. Fo	r example, n't give me	if I give you the words like Cath	letter "C", you erine or Canada.	Fluency (Score 0 – 7)	
								# 18 7 54-17 6 11-13 5 8-10 4 6-7 3 4-5 2 2-3 1 6-1 0 5018 COPTECT	
Say	Animals: : "Now can you name	e as many anim	nals as possible. I	t can b	egin with a	ny letter."		Fluency	

Tell: "I'm going to give you a name and address and I'd like you to repeat the name and address after me. Bo you have a chaince to learn, we'll be doing that 3 times. I'll ask you the name and address later." Score only the third trial.					
	1 st Trial	2 rd Trial	3 rd Trial	1	
Harry Barnes					
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MEMORY		_	_	-	
 Name of the woman Name of the USA pr Name of the USA pr 	who was Prime Minister esident.	·		Score 0 =	
LANGUAGE					
		of the subject. As a practice score 0 and do not continu	trial, ask the subject to "Pick up e further.	[Score 0	
 Ask the sut 	ject to "Place the paper ject to "Pick up the per	noil but not the paper"			
 Ask the sut 	ject to "Pass me the pe oil and paper in front of t	moil after touching the pa the subject before each con	per" nmand.		
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Note: Place the pen LANGUAGE Ask the subject to w holiday/weekend/Ch	oil and paper in front of the two (or more) completistmas. Write in complete are two (or more) complete.	the subject before each con ete sentences about his/her te sentences and do not us	imand.		
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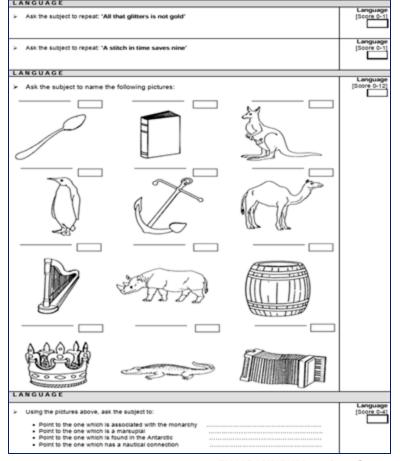


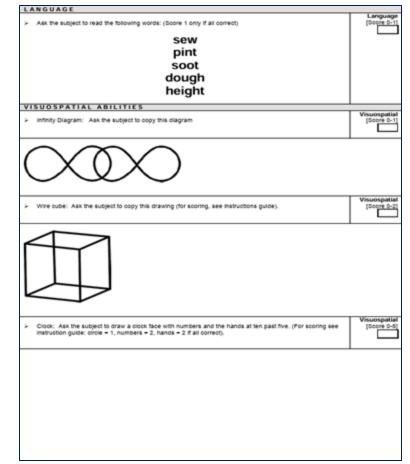






Addenbrooke's Cognitive Examination (ACE)





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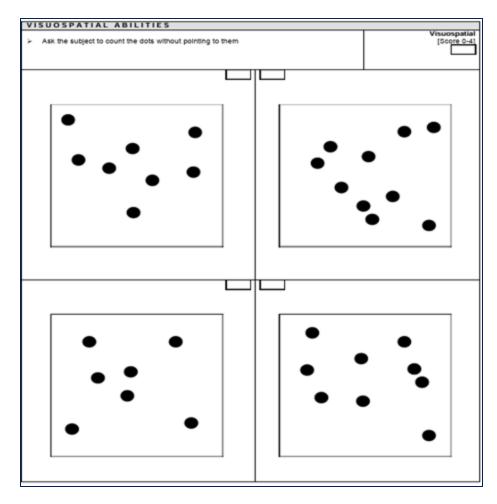


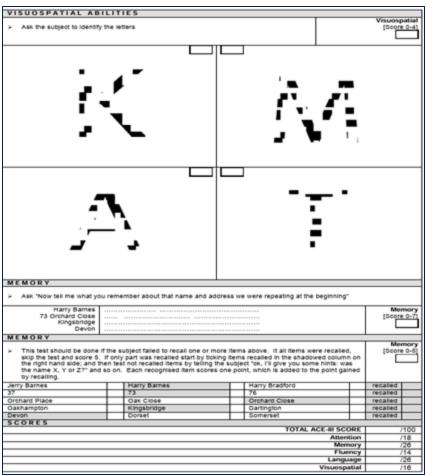






Addenbrooke's Cognitive Examination (ACE)





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Take home message

Cognitive decline is common in aging and early detection is vital

 Physiotherapists play a key role in screening and supporting patients with cognitive impairment

Use validated tools tailored to the individual's background

 Early intervention enhances treatment outcomes, safety, and caregiver support

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THANK YOU!



















