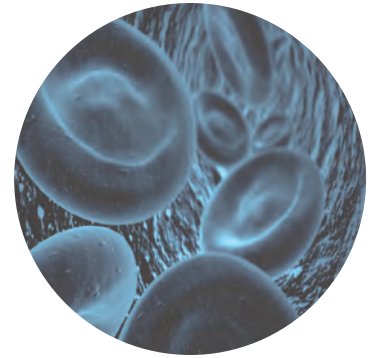


# NRS

NEUROPSYCHOLOGY  
REHABILITATION  
SERVICES

*Rehabilitation for Cognitive,  
Emotional and Behavioral  
Brain Function*

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## NEUROPSYCHOLOGICAL EXAMINATION OF PATIENTS WITH KNOWN OR SUSPECTED DEMENTIA

The goal of this brochure is to inform and increase awareness of the application of neuropsychological services in the treatment of Dementia.

Neuropsychology is the profession that treats patients who have suffered some injury to their brain with a corresponding change in thinking abilities and personality. Furthermore, neuropsychology is the relationship between the brain and its functional expression through our daily behaviors.

The neuropsychologist examines the brain by administering a neuropsychological examination (NPE), an assembly of many tests specifically designed to evaluate thinking abilities and behavior (our type of MRI). The purpose of the NPE is to evaluate each patient's brain rather than each patient's complaints.

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**R. Sica, S. Greco & Associates**

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## Neuropsychological Examination and Management of Patients With Known or Suspected Dementia

- As is true of many medical conditions, identification of dementia very early in its course is a key feature of prevention strategy. The rationale is that acting early, before significant deterioration has occurred, allows for the application of various therapies.
- Neuropsychology, with its demonstrated ability to advance early, reliable diagnosis of a variety of different types of dementia, plays a strategic role in the medical management and ultimately in the prevention approaches to delay the occurrence of events, such as injury and nursing home placements.

## Clinical Application of Neuropsychology in the Diagnosis and Management of Dementia

### NEUROPSYCHOLOGY IS EMPLOYED IN AT LEAST 4 COMMON SITUATIONS:

1. **Neuropsychological Consultation:** This is an interview which assists in arriving at a clinical diagnosis in medical situations in which neurocognitive impairment is suspected. The referral may occur in a situation in what is believed to be an early stage of Alzheimer's disease, but can arise from a number of other neurologic conditions, such as psychiatric disorders or from a variety of general medical conditions.



2. **Neuropsychological Examination:** This is a comprehensive examination which can be used both in the detection of the dementia and in the differential diagnosis of disorders.
3. **Competency Assessment:** The physician may seek an estimate of the patient's functional status and may make a referral to assess competency.
4. **Case Management:** Physicians may seek neuropsychological input for patient management, including cognitive intervention, counseling, or behavioral management.

## Use of Neuropsychology in Primary Care Practice

- Despite the acceptance of **neuropsychological examination** in geriatric practice, cognitive assessment (even mental status screening) is not common in primary care practices. This is due to a combination of factors, including economic pressures imposed by managed care, physician burden, and availability of specialists to handle dementia referrals.
- A neuropsychological examination is "unique" in its selective contribution to the physician for **mild cognitive impairment** or in atypical presentations, such as changes in memory, organization, and reasoning.
- Primary care physicians benefit from early detection of dementia (mild cognitive impairment) by increasing treatment options, and the impact of early treatment upon immediate and long-term outcomes.

## Neuropsychological Consultation and Assistance for Families of Patients With Dementia

- Most cases of dementia rob the patient of the capacity to independently manage his or her own affairs.
- The dementia patient's family becomes indispensable in everyday tasks and to ensure safety.
- The role of the family during neuropsychological rehabilitation can take different forms. This is determined by a number of factors, including the patient's presentation and the family's goals.
- This treatment does not directly affect the neuropathological process causing the dementia. Rather, treatment can affect coping and everyday functioning, and prevent consequential dangers.
- Family members are critical to both the formulation and evaluation of intervention.



## Intervention Approaches With Dementia Patients and Their Families

- Feedback from the neuropsychological examination
- Dementia education for the family
- Individual patient counseling
- Intervention program
- Support group
- Assistance with resource management



# DEMENTIA



## The Benefit of Intervention for Dementia Patients and Families

### 1. IMPACT ON PATIENT:

- Reduction of disability
- Reduction of depression and other emotional distress
- Patient's cognitive capacity is made clear as to what they can/cannot do
- Increased functional capacity
- Environmental safety and harmful consequences assessed

### 2. IMPACT ON FAMILY:

- Reduced burden on the caregiver
- Reduction of depression and other emotional distress
- Driving, financial, medical decision-making is shifted to responsible people
- Increased adaptive management of dementia patient

### 3. IMPACT ON HEALTH CARE UTILIZATION:

- Reduced use of services and costs
- Reduction of both patient and caregiver "excess disability" associated costs
- Appropriate usage of beneficial medications
- Reduced usage of ineffective medications and therapeutic treatments
- Reduced health care cost associated with depression
- Increased home-based care; reduction of institutionalization cost
- Reduced caregiver loss of work time and income