HIV-associated neurocognitive disorder: How useful is this diagnosis?

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The Fascati Criteria provides a classification rubric to quantify neurocognitive sequela in adults with HIV. Using this rubric, 52-59% of adults with HIV have some form of HIV-Associated Neurocognitive Disorder (HAND). This is assessed using age/education normed neurocognitive tests that examine such neurocognition in any five domains (e.g., verbal memory, attention). If patients score below 1 standard deviation on any two domains, they are classified as having Asymptomatic Neurocognitive Disorder, or Mild Neurocognitive Disorder if such neurocognitive problems also interfere with everyday functioning. If patients score below 2 standard deviations on any two domains, they are classified as having HIV-Associated Dementia. Yet, studies suggest that over a period of 1 year, a 20% bidirectional fluctuation occurs among these HAND diagnoses. Although some of this fluctuation may be accounted by practice effects, testing error, neuroplasticity, and individual patient factors (e.g., sleepiness), the reliability of these diagnoses may be subjective depending on what neurocognitive domains are being assessed. For example, women with HIV are more prone to impairments in verbal memory and verbal learning than men with HIV; thus, a neurocognitive battery that does not use these measures may underestimate HAND in women. Furthermore, HIV-Associated Dementia may not be progressive as it is typically observed in other dementias. And yet, diagnosing someone with HAND may add additional stress and worry, especially if there are no clear guidelines to treat HAND. In this presentation, these issues concerning HAND are examined along with possible treatments to protect/improve neurocognition.

Biography

David E Vance is a Psychologist at the University of Alabama at Birmingham and is studying cognitive remediation and aging with HIV. He has +180 peer-reviewed publications. He received a White House invitation to attend the first forum on aging with HIV and has participated as an Invited Member of the USA National Institutes of Health Think Tank – Working Group on HIV and Aging. Recently, he was awarded a 2.8 million dollar grant from the USA National Institute of Mental Health titled, “An RCT of speed of processing training in middle-aged and older adults with HIV.”

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