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Recommendations for CSF AD biomarkers in the diagnostic evaluation of dementia and MCI

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This paper presents recommendations, based on the grading of recommendations, assessment, development and evaluation (GRADE) method, for the clinical application of cerebrospinal fluid (CSF) A β_{1-42} , tau and phosphorylated tau in the diagnostic evaluation of patients with dementia and mild cognitive impairment. The recommendations were developed by a multidisciplinary working group based on available evidence and consensus from focused discussions for identification of AD as the cause of dementia, prediction of rate of decline, cost-effectiveness, interpretation of results, and Patient counseling. The working group found sufficient evidence to support a recommendation to use CSF AD biomarkers as a supplement to clinical evaluation, particularly in uncertain and atypical cases of dementia, in order to identify or exclude AD as the cause of dementia. The working group recommended using CSF AD biomarkers in the diagnostic work-up of MCI patients, following pre-biomarker counseling, as an add-on to clinical evaluation to predict functional decline or conversion to AD dementia, and to guide disease management. Due to insufficient evidence, it was uncertain whether CSF AD biomarkers outperform imaging biomarkers. Furthermore, the working group provided recommendations for interpretation of ambiguous CSF biomarker results and for pre- and post-biomarker counseling.

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Emotional and behavioral problems in Swedish preschool children rated by preschool teachers with the Strengths and Difficulties Questionnaire (SDQ)

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Background: There is a high risk that young children who show early signs of mental health problems develop symptoms in the same or overlapping areas some years later. The strengths and difficulties questionnaire (SDQ) is widely used to screen externalizing and internalizing problems early in life. In Sweden 80-90% of all children aged 1-5 years go to preschool and preschool is thus an appropriate context for finding early signs of mental health problems among children.

Methods: This study is part of a longitudinal project to investigate the frequency of emotional and behavioral problems for children between 1-5 years of age in Sweden. The SDQ including the impairment supplement questions were rated by preschool teachers to establish Swedish norms for SDQ in preschool children.

Results: The sample involved 815 children with a mean age of 42 months (SD=16, range 13-71 months). 195 children were followed longitudinally for three years. There were significant differences between boys and girls on all subscales except for the emotional subscale. The prevalence of behavioral problems was similar to other that in European countries, except for prosocial behavior, which was rated lower, and conduct problems, rated higher. Swedish children were estimated to have more problems in the preschool setting, scored by preschool teachers. The development of behavior over time differed for the different subscales of SDQ.

Conclusions: The teacher version of the SDQ, for 2-4 year-olds, can be used as a screening instrument to identify early signs of emotional distress/behavioral problems in young children. Preschool teachers seem to be able to identify children with problematic behavior with the use of SDQ at an early age. The development of behavior over time differs for the different subscales of SDQ. The Swedish norms for SDQ are to a large extent, similar to findings from other European countries.

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