Title: "Pseudodementia" vs Dementia

Authors: Catarina Laginhas [a], João Nuno Fernandes [a], Francisca Braga [a], Círia Pereira [a]

[a] Department of Psychiatry and Mental Health of Unidade Local de Saúde de Lisboa Ocidental

Introduction:

Depressive and cognitive symptoms are common among older people. Both depression and dementia can lead to generalised cognitive and memory dysfunction. Differentiating these disorders is important but challenging.

Objectives:

Our aim is to perform a narrative review of the literature regarding "pseudodementia" and "dementia".

Methods: A semi-structured search was conducted on Pubmed concerning the relationship between pseudodemenia and dementia.

Results:

The close correlation between depression and dementia is well-known. Depression in old age can be an important risk factor, but also a comorbidity often associated with dementia.

The term "pseudodementia" is a popular clinical concept, characterized by impairments in memory, executive function, attention, and language that resemble neurocognitive disorders, but arise from underlying psychiatric conditions, most commonly depression.

Evidence suggest that between 2% and 32% of older adults with cognitive problems actually have "pseudodementia".

Due to the similarities in symptoms between dementia and depression, differentiating this diagnosis can be challenging. It can be achieved by careful screening of both depressive symptoms and cognitive status, complemented by a neuropsychological assessment. Imaging tests also aid the diagnosis.

Additionally, effective treatment for depression can potentially aid in differentiating, leading to an improvement in cognitive symptoms, whereas in dementia there is a progressive cognitive decline.

Conclusion:

“Pseudodementia” is a condition that resembles dementia. Its correct identification is challenging but essential, because it is usually reversible with appropriate treatment.