

Prevalence of Cognitive Impairments in Patients with COPD and Healthy Individuals

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ABSTRACT

Introduction: COPD is a chronic obstruction of lung airflow that interferes with normal breathing and is irreversible. Cognitive impairment appears to be an important determinant of outcomes in COPD. The most obvious independent risk factor for cognitive impairment in patients with COPD is reduced oxygen availability as a result of lung dysfunction. Arterial hypoxia seems to be major contributor to cognitive impairment with higher levels of desaturation increasing risk of cognitive dysfunction. Cognitive functioning affects the duration and frequency of hospital admission and mortality. Therefore, early detection of cognitive impairments is essential in determining any risk to patient's safety.

Methodology: 50 individuals (25 diagnosed COPD patients who have grade of Dyspnea 1-3 according to MMRC and 25 age matched Healthy individuals) of age 45-60 years were included in study. Each individual was assessed for cognitive functions by Montreal Cognitive Assessment (MOCA) Scale and Cognitive Failure Questionnaire (CFQ).

Result: 68% of COPD patients had mild cognitive impairment compared to the healthy individuals which is 28% when assessed by Montreal Cognitive Assessment (MoCA) Scale. Out of 7 component of Montreal Cognitive Assessment (MoCA) scale, Memory, Executive function and Attention was most affected in COPD patients. In Cognitive Failure Questionnaire (CFQ), COPD patients are suffering with forgetfulness, distractibility and false triggering occasionally with 33%, 21.50% and 26.50%. COPD patients are having more problems of forgetfulness, distractibility and false triggering than healthy individuals.

Conclusion: Study Concluded that Cognitive impairment was present in COPD patients as well as in Healthy individuals, but the prevalence of cognitive impairment was higher in COPD patients than in healthy individuals.

Keywords: COPD, Cognitive impairment, Dyspnea, MOCA Scale, Cognitive Failure Questionnaire

