

Anticipative worth of lexical-substance process within the early designation of alzheimer's malady. A case report

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Abstract

The psychological feature decline related to Alzheimer's unwellness (AD) compromises nearly all mental functions of the individual, however, the psychological feature talents that square measure most affected since the onset of the unwellness square measure memory and language. the subsequent article presents a case of a 72-year-old man with inchoate AD traces, World Health Organization was evaluated employing a psychological feature performance protocol, a daily-activity scale, and a severity rating scale for insanity. the target of the analysis was to characterize performance in lexical-semantic talents of the patient that permits to examine clinically the prognosticative price of those linguistic functions. The results obtained from the analysis permit to estimate the high discriminative price of linguistic domains like verbal fluency and denomination in early stages of AD.

Keywords: alzheimer's unwellness, psychological feature functions, lexical-semantic level

Introduction

Alzheimer's unwellness is that the commonest style of insanity. characterised by associate insidious onset and progressive course, its incidence takes place chiefly in maturity. This condition manifests itself through psychological feature, activity and useful decay.¹ This psychological feature decline that happens in AD compromises much all mental functions, however, those who square measure most affected since the start of the unwellness square measure memory and language two wherever the most alterations square measure within the linguistics fluency and denomination.³ However, there are difficulties in linguistics tasks of lexical call and linguistics cryptography, among others.⁴ so, knowing the lexical-semantic performance within the aging stage might contribute to the first identification of AD given the prognosticative price that these linguistic domains might present^{1,2,4} considering that timely detection and treatment of AD will increase the likelihood of delaying its inevitable progression.

This article presents the case of a 72-year-old male having twelve years of schooling, World Health Organization involves the Clinic of Human Communication Studies at University of Bio-Bio, by referral of specialist, with identification of Alzheimer's unwellness within the initial stage. In order to live the patient's psychological feature performance, the Chilean version of the check for Early Detection of Alzheimer's unwellness (TDPEA-Ch) was administered and therefore the Chilean version of the Addenbrooke-Revised psychological feature Examination was used as a denotative frame (ACE-R- Ch). The Barthel Index was applied to assess the practicality of activities of daily living (ADL). Finally, the severity of insanity was categorised by the means that of the Clinical

insanity Rating Scale (CDR).

The results of the clinical analysis with reference to the CDR protocol allowed to classify the topic in an exceedingly stage of delicate insanity evolution, as a result of it obtained one purpose, of a scale of five, during which CDR zero denotes absence of psychological feature alteration, CDR 0.5 expresses terribly delicate insanity, CDR one indicates delicate insanity, CDR two shows moderate insanity and CDR three indicates severe insanity. The Barthel Index showed seventy five points out of a complete of a hundred, inserting it in an exceedingly state of delicate dependency in activities of everyday life, needing oversight in some activities like personal hygiene tasks, dressing and grooming. As for the performance within the ten tasks of TDPEA-Ch, difficulties square measure ascertained, getting a score of thirty out of a hundred, failing to get the most score of ten (one purpose per item) in none of them. The tasks evaluated are: 1) linguistics verbal fluency, (name fruits), wherever he obtained four points; two) descriptive linguistics verbal fluency (words starting with the letter "f") with five points; 3) verbal fluency of correct names (public characters) with 2 points; 4) denomination to the definition, with six points; 5) denomination of objects by visual confrontation, with five points; 6) name of correct names, with four points; 7) immediate recall of an inventory of words, with two points; 8) postponed memory of an inventory of words, with zero points; 9) immediate recall of information of someone, with two points; and 10) postponed memory of a person's knowledge, with zero points. The performance of the varied TDPEA-Ch tasks square measure congruent with the low psychological feature potency immeasurable the ACE-R-Ch check in language subtests (18/26 points), memory (7/26 points), verbal fluency (5/14 points) and with the world psychological feature potency score of this check (total score 53/100).

Discussion

Firstly, the low performance reportable in lexical-semantic skills permits U.S.A. to spotlight and ensure the discriminative price of those linguistic domains within the early stages of AD, that is in agreement with what has been reportable within the literatura relating to the linguistic performance within the early stages of this insanity in lexical-semantic tasks like verbal fluency⁵ denomination of objects by visual confrontation⁶ denomination of famed characters⁷ and in some memory tasks, like immediate recall⁵ and delayed recall.⁸

Second, knowledge provided by tests like ACE-R-CH and TDPEA-CH as a full permit U.S.A. to acknowledge a profile for linguistic alterations in AD, wherever the correct analysis of the lexical-semantic domain of the individual will contribute and provides clues to enrich the first identification of AD; though sociodemographic factors like age, occupation and socio-cultural level, likewise as cognitive psychology variables of words; will influence and generate bias within the results obtained.

Third, considering the population aging and the importance of getting new instruments that complement the present psychological science tests, it's ascertained the requirement to develop studies with population teams permitting to understand the linguistic-communicative profile of this unwellness within the completely different stages of evolution, thus on provide therapeutic alternatives that permit to compensate the deficit of the language and to boost the standard of lifetime of the users and their caregivers on the idea of valid clinical proof and with well-tried results.

Conflict of interest

The author declares no conflict of interest.

References

1. Valls PC, Molinuevo JL, Rami L. Diagnóstico precoz de la enfermedad de Alzheimer: fase prodrómica y preclínica. *Neurol.* 2010;51:471–480.
2. Cuetos VF, Menéndez GM, Calatayud NT. Descripción de un nuevo test para la detección precoz de la enfermedad de Alzheimer. *REV NEUROL.* 2007;44(8):469–474.
3. Facal D, González M, Buiza C, et al. Envejecimiento, deterioro cognitivo y lenguaje: Resultados del Estudio Longitudinal Donostia. *Revista de Logopedia, Foniatría Y Audiología.* 2009;29(1):4–12.
4. Hernández JJ. Demencias: los problemas de lenguaje como hallazgos tempranos. *Acta Neurol Colomb.* 2010;26:101–111.
5. Cuetos F, Martínez T, Martínez C, et al. Lexical processing in Spanish patients with probable Alzheimer's disease. *Cogn Brain Res.* 2003;17(3):549–561.
6. Cuetos F, Rodríguez FJ, Menéndez M. Semantic markers in the diagnosis of neurodegenerative dementias. *Dement Geriatr Cogn Disord.* 2009;28(3):267–274.
7. Garrard P, Maloney L, Hodges J, et al. The effects of very early Alzheimer's disease on the characteristics of writing by a renowned author. *Brain.* 2005;128(2):250–260.
8. Chen P, Ratcliff G, Belle SH, et al. Ganguli M. Cognitive tests that best discriminate between presymptomatic AD and those who remain nondemented. *Neurology.* 2000;55(12):1847–1853.