DEMENTIA AFTER STROKE: BASELINE FREQUENCY, RISKS, AND CLINICAL FEATURES IN A HOSPITALIZED COHORT

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Neurology 1992;42:1185-1193

We determined the frequency of dementia in a cohort of 251 patients aged μ 60 years hospitalized with acute ischemic stroke, based on examinations performed 3 months after stroke onset. Using modified DSM-III-R criteria, we found dementia in 66 patients (26.3%). Diagnostic agreement among raters was excellent ($\kappa = 0.96$). In a control sample of 249 stroke-free subjects recruited from the community and matched by age, we found dementia in eight subjects (3.2%). Using a logistic regression model to estimate the risk of dementia associated with stroke in the combined samples, the odds ratio (OR) for stroke patients compared with control subjects was 9.4 ($p < 0.001$). Advancing age and fewer years of education were significant, independent correlates of dementia, with a trend evident for race (non-white versus white). Confining the analysis to subjects residing in the Washington Heights-Inwood community of northern Manhattan, the OR was 10.3 ($p < 0.001$) with significant age and race effects. We conclude that ischemic stroke significantly increases the risk of dementia, with independent contributions by age, education, and race.

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Comment from Lalit Kalra, FRCP, PhD, Editorial Board Member: *This seminal paper established the association between stroke and dementia, highlighting the contribution of ischemia to degenerative processes in the brain. It catalyzed research into the determinants and mechanisms for vascular dementias and understanding the relationships between vascular risk factors and progression of Alzheimer disease.*

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Neurology 2011;77;1610

DOI 10.1212/01.wnl.0000407272.31554.0e

This information is current as of October 24, 2011

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