Editors’ Note: In the study by Broeders et al. concerning cognitive impairment in Parkinson disease (PD), 2 different groups report their own experiences. Kano et al. propose that patients with rigidity-dominant PD may be more susceptible to developing cognitive impairment than those in the tremor-dominant group. The need to provide more specific inclusion and exclusion criteria and the need to use specific tests are Dr. Dyck’s main concerns regarding the Dutch survey on small-fiber neuropathy. —Chafic Karam, MD, and Robert C. Griggs, MD

EVOLUTION OF MILD COGNITIVE IMPAIRMENT IN PARKINSON DISEASE

Marina Picillo, Naples and Salerno; Paolo Barone, Maria Teresa Pellecchia, Salerno; Gabriella Santangelo, Caserta, Italy: Broeders et al.1 reported on the evolution of mild cognitive impairment (MCI) in patients with de novo Parkinson disease (PD). We reported the prevalence of PD-MCI and its 2-year development in our study population.2,3 Seventy-nine de novo, drug-naive parkinsonian patients were enrolled. Diagnosis was checked twice during the course of the study and 3 patients were excluded due to a revised diagnosis. Two years later, 61 patients participated in follow-up. According to recent criteria,4 PD-MCI occurred in 28/76 patients (36.8%) at baseline and in 26/61 patients (42.6%) at follow-up. According to PD dementia (PDD) criteria,5 none of the patients showed PDD. At baseline and 2-year follow-up, patients with MCI had lower Mini-Mental State Examination (MMSE) score (26.4 [2.1] vs 27.8 [1.6], p = 0.004, and 27 [2.5] vs 28 [1], p = 0.04, respectively) but not higher motor scores (Unified Parkinson’s Disease Rating Scale [UPDRS]–III, Hoehn & Yahr) and mood symptoms (Hospital Anxiety and Depression Scale) than patients without PD-MCI. Compared to the study by Broeders et al., we found a lower percentage of PD-MCI at 2-year follow-up and no PDD. Furthermore, our patients with PD-MCI did not present with higher motor and mood scores than patients without PD-MCI. We speculate that these discrepancies could be due to the younger age at onset of our cohort (58.5 [8.3] vs 66.1 [10.1] years).

Osamu Kano, Ken Ikeda, Yasuo Iwasaki, Tokyo: Broeders et al.1 reported a group of new patients diagnosed with PD. About one-third of these patients fulfilled the criteria for PD-MCI at the time of diagnosis. After 5 years, approximately 50% of the patients were without dementia. We studied cognitive function in patients with PD and analyzed the relationship between cognitive function and motor symptoms in PD.6 We assessed cognitive function by using the MMSE. The patients performed poorly on the MMSE, which suggests a relationship between severity of rigidity and memory impairments. Broeders et al. reported that patients with PD were evaluated using the UPDRS. We would like to know which part was used. We think that patients in the rigidity-dominant group are more susceptible to developing cognitive impairment than those in the tremor-dominant group. However, it was not clear from this study whether there was any relationship between cognitive impairment and parkinsonian symptoms.

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