

SHORT ASSESSMENT OF EXECUTIVE FUNCTIONS IN GREEK HIV – PATIENTS USING THE FRONTAL ASSESSMENT BATTERY

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Abstract

OBJECTIVE: The introduction of combination antiretroviral therapy (cART) has transformed HIV from a fatal disease to a chronic condition. However, although patients may be relieved of physical symptoms, studies have consistently shown the persistent existence of cognitive impairment, even in patients undergoing cognitive treatment, commonly referred as HIV – associated dementia. More specifically, findings show deficits in executive functions, resembling patterns more prominently found in frontal lesions. The advent of these findings showcase the need for appropriate neuropsychological screening tests in order to assess cognitive function in HIV patients. In this study, we assess the implications of introducing the FAB (Frontal Assessment Battery) to a simple, fast screening process.

METHOD: We gathered data from 2 groups: a patient group consisting of HIV infected patients undergoing cART treatment at the AHEPA hospital in Greece, and from a control group. They patients underwent a short neurocognitive evaluation. We administered 3 short, fast screening tests: FAB, MOCA (Montreal Cognitive Assessment) and MMSE (Mini Mental State Exam).

RESULTS: Consistent with preexisting finding, HIV patients consistently scored lower than the control group in the executive function tasks. All 3 test were found to be highly correlated with each other, with MOCA being a predictor factor for FAB scores. In measuring the 3 tests' sensitivity to HIV associated cognitive impairments, we found that FAB was the most sensitive among the three.

CONCLUSIONS: Our goal was to examine the utility of the FAB test when screening for cognitive deficits in HIV patients. We found that FAB can be a valuable tool in neuropsychological assessment, but given the varied nature of the HIV patients' cognitive profile, it should be accompanied with an extensive battery of tests