THE MONTREAL COGNITIVE ASSESSMENT (MOCA) AND KOREAN MINI-MENTAL STATE EXAMINATION (K-MMSE) IN PARKINSON’S DISEASE

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Although the K-MMSE has shown a limitation of diagnosis in the mild cognitive impairment (MCI), the Montreal Cognitive Assessment (MoCA) was recently proposed for diagnosis of the MCI. The MoCA was suggested as screening tool of cognitive deficits in patients with PD. Therefore, the aim of this study was to compare MoCA to K-MMSE score in PD-MCI.

Methods: Firstly fifteen patients with PD diagnosed by the UK Brain Bank criteria for PD were participated to this study. Second, these patients were diagnosed as PD-MCI by the Peterson criteria for MCI. Disease severity and stage were determined by the motor scale of the UPDRS. All patients were administered the MoCA and the K-MMSE.

Results: The MoCA score was correlated with the K-MMSE score (p = 0.002). The range and standard deviation of scores were larger with the MoCA than with the K-MMSE. After adjusting for age, education and depression, the MoCA and K-MMSE were correlated with UPDRS motor score (p = 0.011). As compared after adjusting for age, education and depression between the MoCA and K-MMSE, attention, orientation and visuospatial function only were correlated.

Discussion: Our results showed correlation between the MoCA and K-MMSE in PD. Although the MoCA and K-MMSE were UPDRS motor scale, the range of MoCA scores in PD was more extended than that of the K-MMSE. Domains of the attention and visuospatial function revealed the significant correlation between the MoCA and K-MMSE.