The aim of the study was to investigate clinical-pathological specificities and date of neurovisualization (brain MRI) in dementia of Alzheimer’s type, combined with cerebrovascular brain lesion. Material and methods. All the patients diagnosed with late-life dementia who had been first hospitalized in psychogeriatric department in 2004-2009, were included in the study. The results of clinical examination and brain MRI data of 94 subjects diagnosed with mixed Alzheimer’s disease with no signs of cerebrovascular lesion. Results. The late-life onset of the disease, a high risk for the development of acute psychotic states with delirium, a high rate of depressive disorders and acute CVA are more characteristic of mixed dementia. According to MRI data focal changes in white substance of large hemispheres and subcortical nuclei and periventricular leukoaraiosis were revealed in the majority of these patients. Late age of the dementia onset and frequency of acute psychoses correlated with lesion of subcortical nuclei and pronounced leukoaraiosis. Conclusions. The data of neurovisualization technique are necessary for diagnostic delimitation of mixed dementia from “pure” Alzheimer dementia and are important for determination of prognosis and course of the disease and substantiation of indications for complex therapeutic intervention.