CAREGIVER BURDEN AND COGNITIVE FUNCTIONING IN PARKINSON DISEASE

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Introduction: Previous studies of cognitive factors in Parkinson disease have not produced consistent findings of a relationship to caregiver stress. A limitation of these studies has been that cognitive measures have been self-report data or scales of global cognitive functioning (MMSE, etc.). Cognitive deficits in Parkinson disease are distinct from those targeted by global measures, which are more sensitive to cortical conditions such as Alzheimer's disease.

Aims: To examine the relationship between caregiver burden and Parkinson disease symptoms, using separate cognitive measures for memory and executive functioning.

Method: Participants were Parkinson patients and their spousal caregivers. Patients were administered a battery of neuropsychological tests and neuropsychiatric questionnaires, including immediate and delayed verbal and visual memory measures, measures of executive functioning, a depression scale, and the UPDRS. Spousal caregivers filled out a set of questionnaires measuring depression, subjective caregiver distress, and objective caregiver burden.

Results: Multiple regression analysis found that executive dysfunction was the primary predictor of objective caregiver burden, and motor symptoms were a secondary predictor. Caregiver distress was predicted only by patient memory dysfunction.

Conclusions: Motor functioning, memory functioning, and executive functioning all have different patterns of impact upon caregiver burden, with cognitive variables having a greater impact than physical limitations of the disease. This study suggests that from a caregiver's perspective it may even be more important for physicians to manage cognitive aspects of Parkinson disease than patient motor impairment.