FRONTAL ASSESSMENT BATTERY (FAB): A PRAGMATIC STUDY

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Objective: To report pragmatic use of the Frontal Assessment Battery (FAB).

Methods/setting: Cognitive Function Clinic based in a regional neuroscience centre. FAB was administered to patients (n = 35) in whom there was diagnostic uncertainty and whose differential diagnosis included frontotemporal lobar degeneration. Final diagnosis was by experienced clinician judgement based on widely accepted diagnostic criteria for various neurodegenerative disorders.

Results: FAB proved easy to use and acceptable to patients. FAB scores correlated with Mini-Mental State Examination (MMSE) scores (r = 0.63) but not with patient age (r = -0.16). Raw FAB scores were significantly lower in patients with behavioural variant frontotemporal dementia (bvFTD) compared with non-bvFTD cases. However, a previously reported "executive-to-global" ratio (= FAB score/MMSE score) showed no significant difference between the two groups. At the FAB cutoff of ≥ 12/18, the test showed good sensitivity (1.00) but poor specificity (0.48) for the diagnosis of bvFTD, with poor positive predictive value (0.43) but excellent negative predictive value (1.00). The overall diagnostic accuracy was modest (area under the ROC curve = 0.74).

Discussion/conclusions: FAB proved easy to use in clinical practice. In patients whose diagnosis is uncertain, FAB may be useful as a sensitive screening test for bvFTD, although specificity is low.