

Raina SK

*Department of Community Medicine, Dr. Rajendra Prasad
Government Medical College, Kangra, Himachal Pradesh,
India. E-mail: ojasrainasunil@yahoo.co.in*

A Comment on Assessment of Mild Cognitive Impairment with Mini Mental State Examination Among Adults in Southeast Nigeria

Sir,
Went through article entitled “Assessment of mild cognitive impairment (MCI) with mini mental state examination among adults in Southeast Nigeria” published in your journal (2012;2:99-102).
[1] As pointed out by the authors and as available from literature search on this topic, a score of < 24 out of a maximum of 30 in the mini mental state examination (MMSE) defines the abnormal cognitive function. This definition has been widely accepted by authors conducting studies on dementia all over the world working in different socio-cultural environment.^[2-4] It is now well-known that MCI, (also known as incipient dementia, or isolated memory impairment) is a brain-function syndrome involving the onset and evolution of cognitive impairments beyond those expected based on the age and education of the individual, but which are not significant enough to interfere with their daily activities.^[5] The authors have done a decent enough job in focussing on MCI, a rather neglected topic in developing part of the world. However, the concern for me in this study is the cut-off used by the authors for defining MCI (17 out of a total of 30), which seems arbitrary. Is there a basis for choosing this cut-off? if yes, this should have been elaborated in detail. I have and continue to work on cognitive impairment in different settings (urban, rural, tribal and migrant), but for me the cut-off has always remained the same. If at all changes are necessary, it is modifying the MMSE and making it relevant to the local needs.^[4]

References

1. Onwuekwe I. Assessment of mild cognitive impairment with mini mental state examination among adults in southeast Nigeria. *Ann Med Health Sci Res* 2012;2:99-102.
2. Rajkumar S, Kumar S, Thara R. Prevalence of dementia in a rural setting: A report from India. *Int J Geriatr Psychiatry* 1997;12:702-7.
3. Shaji S, Promodu K, Abraham T, Roy KJ, Verghese A. An epidemiological study of dementia in a rural community in Kerala, India. *Br J Psychiatry* 1996;168:745-9.
4. Raina SK, Pandita KK, Razdan S. Incidence of dementia in a Kashmiri migrant population. *Ann Indian Acad Neurol* 2009;12:154-6.
5. Petersen RC, Smith GE, Waring SC, Ivnik RJ, Tangalos EG, Kokmen E. Mild cognitive impairment: Clinical characterization and outcome. *Arch Neurol* 1999;56:303-8.

Access this article online	
Quick Response Code: 	Website: www.amhsr.org
	DOI: 10.4103/2141-9248.121233