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Neurobehavioral Evaluation (2)

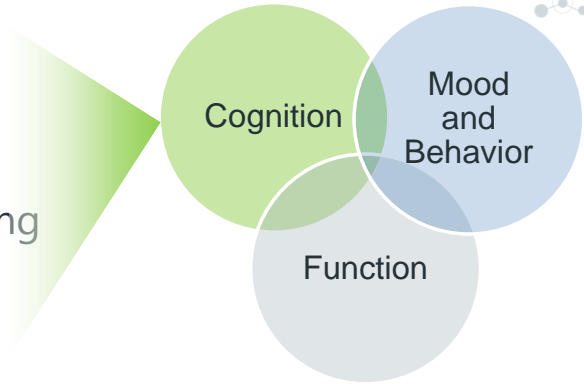
Asst. Prof. Chatchawan Rattanabannakit, MD.
Division of Neurology, Department of Medicine
Faculty of Medicine Siriraj Hospital, Mahidol University



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Scope of Neurobehavioral evaluation

- ◎ Attention
- ◎ Language
- ◎ Perceptual-motor
- ◎ Memory and learning
- ◎ Executive function
- ◎ Social cognition



Cognition

Mood and Behavior

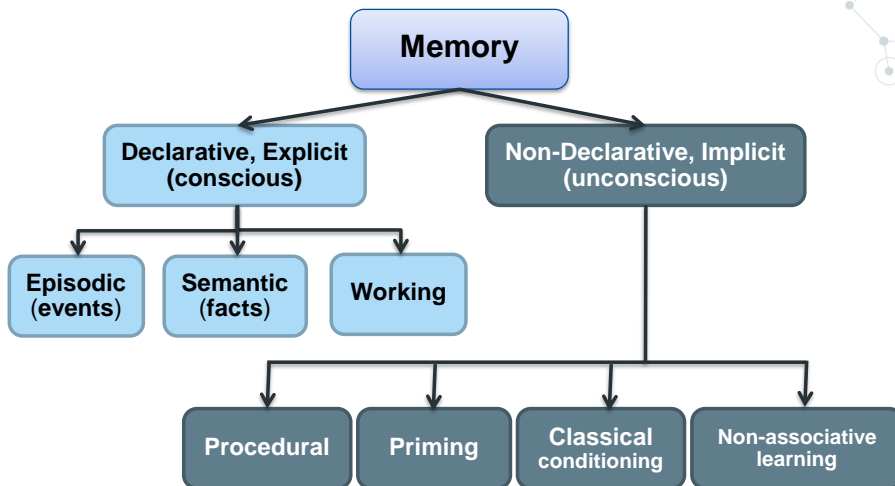
Function

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Memory and Learning

“We do not know the true value of our moments
until they have undergone the test of memory”

Georges Duhamel (1884 – 1966)



Adapted from: Squire LR. Neurobiol Learn Mem. 2004
Budson AE, et al. N Engl J Med. 2005

Episodic memory

- ◎ Ability to **consciously recall personal** episodes or experiences
- ◎ Involves a series of steps:
 - **Encoding**: cerebral resources → processing of information via attentional mechanisms
 - **Consolidation**: Storage of information in a form that will be mentally accessible in the future
 - **Retrieval**: The act of remembering such information
- ◎ The **hippocampal formation and medial temporal lobes** are critical to episodic memory formation

Matthews BR. Continuum (Minneapolis) 2015

Semantic memory

- ◎ An individual's **acquired knowledge** about things in the world, their relationships, and their uses, **including facts and concepts as well as words** and their meaning
- ◎ The clinical presentation of semantic deficits most often involves the cognitive domain of **language** with presenting symptoms of anomia
- ◎ **Anterior and inferior temporal lobe regions** are implicated as the major site of pathology in patients with relatively isolated semantic memory deficits

Matthews BR. Continuum (Minneapolis) 2015

Working memory

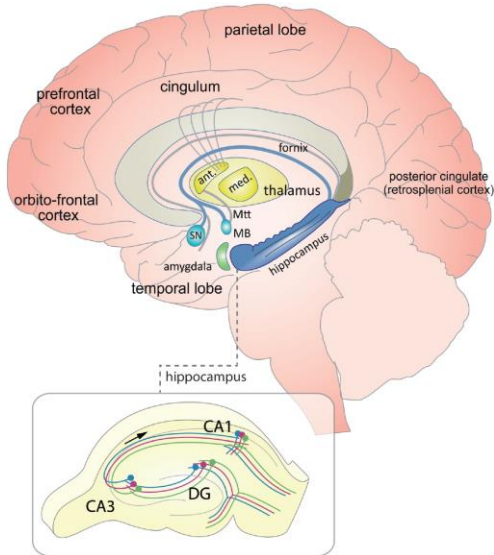
- ◎ The **active maintenance** of verbal and nonverbal information in the mind for potential manipulation to **complete goal-directed tasks and behaviors**
- ◎ Generally considered a **component of executive function**
- ◎ Major anatomical involvement
 - Phonological: **Prefrontal cortex**, Broca's - Wernicke's area
 - Spatial: **Prefrontal cortex**, visual-association area

Matthews BR. Continuum (Minneap Minn) 2015
 Rabinovici GD, et al. Continuum (Minneap Minn) 2015
 Budson AE, et al. N Engl J Med 2005

Table 1. Selected Memory Systems.

| Memory System | Major Anatomical Structures Involved | Length of Storage of Memory | Type of Awareness | Examples |
|-------------------|----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Episodic memory | Medial temporal lobes, anterior thalamic nucleus, mammillary body, fornix, prefrontal cortex | Minutes to years | Explicit, declarative | Remembering a short story, what you had for dinner last night, and what you did on your last birthday |
| Semantic memory | Inferolateral temporal lobes | Minutes to years | Explicit, declarative | Knowing who was the first president of the United States, the color of a lion, and how a fork differs from a comb |
| Procedural memory | Basal ganglia, cerebellum, supplementary motor area | Minutes to years | Explicit or implicit, nondeclarative | Driving a car with a standard transmission (explicit) and learning the sequence of numbers on a touch-tone phone without trying (implicit) |
| Working memory | Phonologic: prefrontal cortex, Broca's area, Wernicke's area Spatial: prefrontal cortex, visual-association areas | Seconds to minutes; information actively rehearsed or manipulated | Explicit, declarative | Phonologic: keeping a phone number "in your head" before dialing Spatial: mentally following a route or rotating an object in your mind |

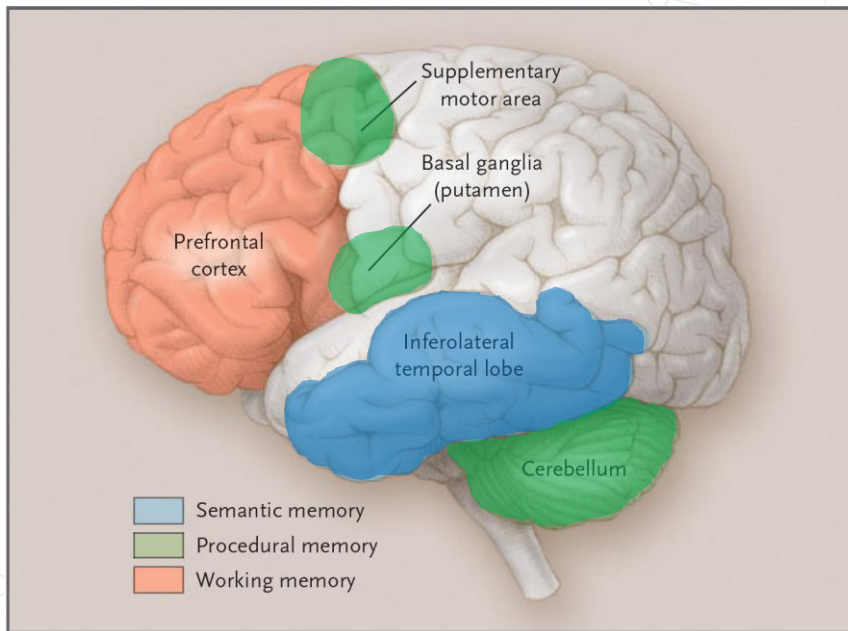
Budson AE, et al. N Engl J Med 2005;352:692-9



Localization of Episodic Memory

- Hippocampal formation and medial temporal lobes
- Papez circuit

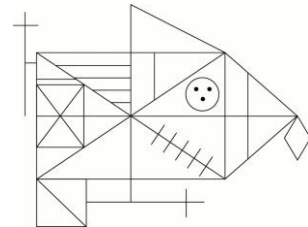
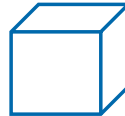
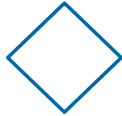
Matthews BR. Continuum (Minneapolis) 2015



Budson AE, et al. N Engl J Med 2005

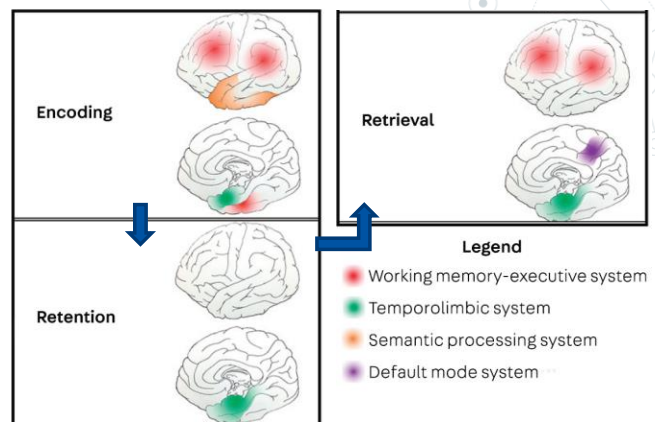
Evaluation of memory

- ◎ Screening evaluation first:
 - level of consciousness, alertness, attention, language function, neurovisual system
- ◎ **Episodic memory:** Remember and asked to recall in the next 10-15 minutes
 - Verbal memory: Remember the word list (3-10), paragraph
 - ◎ ต้นไม้ รถยนต์ มือ
 - ◎ หน้า ผ้าไหม วัด มะลิ สีแดง
 - Visual memory: Remember the diagram



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- ◎ Encoding
- ◎ Consolidation - retention
- ◎ Retrieval
 - Free recall?
 - Cued recall?
 - Recognition?

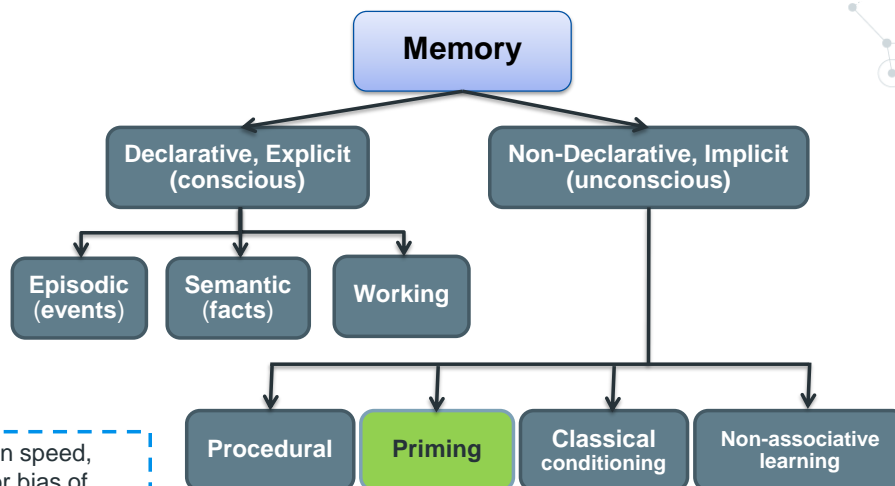


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Other tests of memories


- ◎ **Semantic memory**
 - Name pictures, match pictures with words
 - Semantic fluency
 - Ask for general knowledge
- ◎ Working memory → assess in executive function
- ◎ Procedural memory → history taking

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A change in speed, accuracy or bias of processing a stimulus owing to prior exposure to that stimulus

Adapted from: Squire LR. Neurobiol Learn Mem. 2004
Budson AE, et al. N Engl J Med. 2005

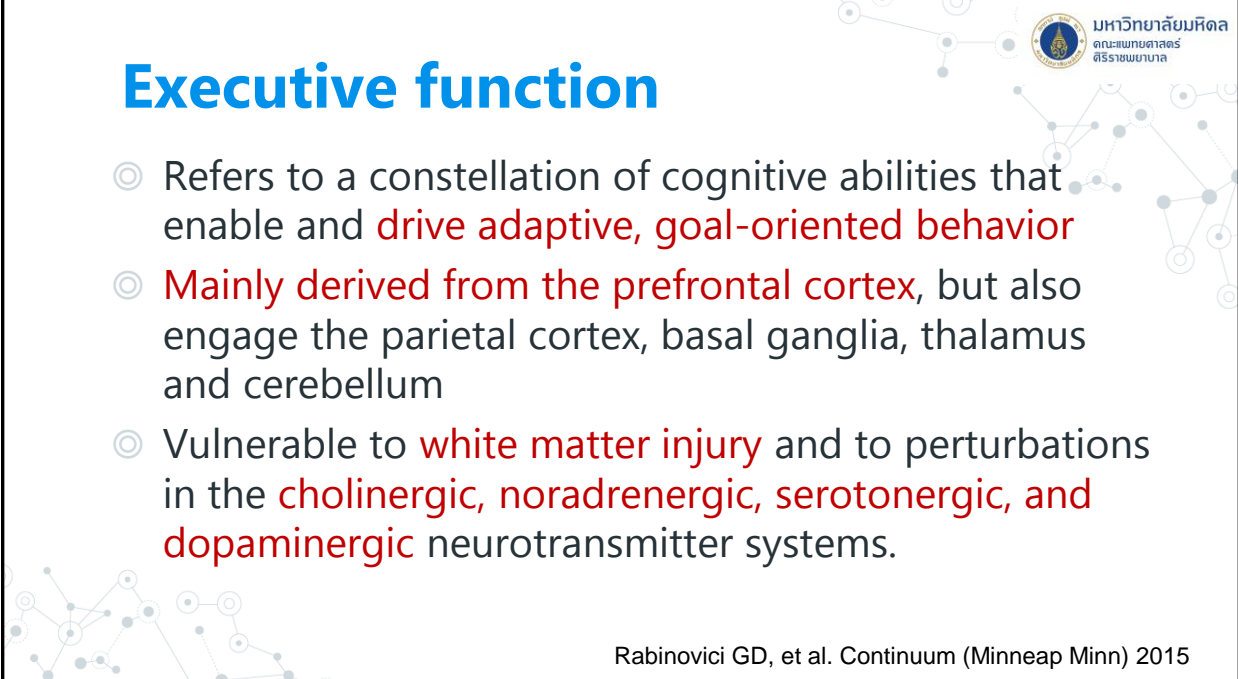


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Executive function

“When it is obvious that the goals cannot be reached,
don't adjust the goals, adjust the action steps.”

Confucius



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Executive function

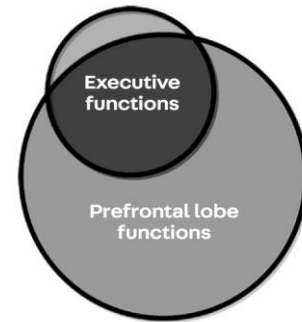
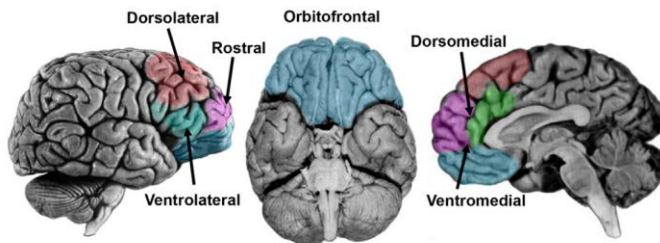
- ⊙ Refers to a constellation of cognitive abilities that enable and **drive adaptive, goal-oriented behavior**
- ⊙ **Mainly derived from the prefrontal cortex**, but also engage the parietal cortex, basal ganglia, thalamus and cerebellum
- ⊙ Vulnerable to **white matter injury** and to perturbations in the **cholinergic, noradrenergic, serotonergic, and dopaminergic** neurotransmitter systems.

Rabinovici GD, et al. Continuum (Minneapolis) 2015



- Executive function is mainly derived from the prefrontal cortex, but also engage the parietal cortex, basal ganglia, thalamus and cerebellum

PREFRONTAL SUBDIVISIONS



Henri-Bhargava A, et al. Continuum (Minneapolis) 2018.
 Szczepanski SM, et al. Neuron 2014.

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Executive function (DSM-5)

- Planning
- Decision making
- Working memory
- Mental/cognitive flexibility
- Responding to feedback/error correction
- Inhibition/ overriding habits



Tests of executive function

- ⊙ Working memory
- ⊙ Set shifting (Mental/cognitive flexibility)
- ⊙ Inhibition
- ⊙ Fluency

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Working memory

- ⊙ Digit span (forward, backward)
- ⊙ Serial subtraction
 - Serial 7s: $100 - 7 \dots$
 - Serial 3s: $20 - 3 \dots$
- ⊙ List the day of the week backward
- ⊙ List the month of the year backward
- ⊙ Spelling the word backward

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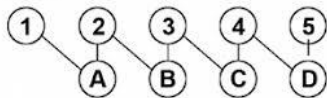
Set shifting (cognitive flexibility)

- Trails Making Test (A and B)

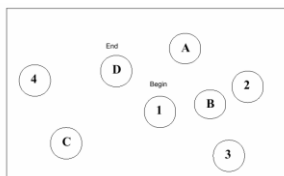
a. Part A



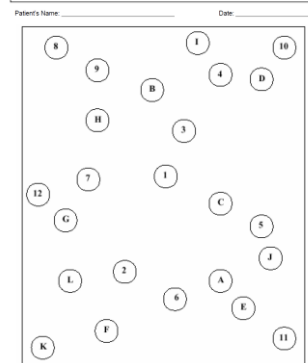
a. Part B



Trail Making Test Part B – SAMPLE



Trail Making Test Part B



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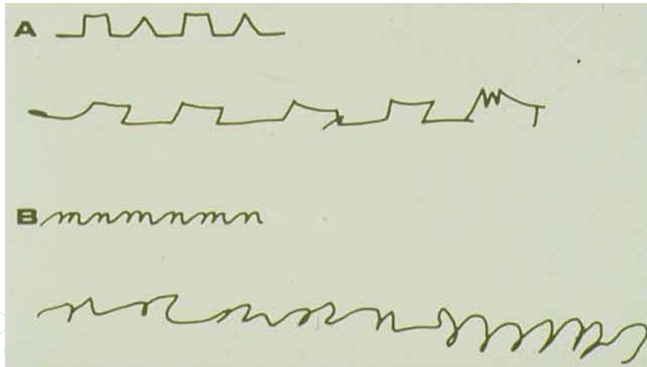
Set shifting (cognitive flexibility)

- Trails Making Test (A and B)
- Alternating sequence task: manual (luria), writing



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Set shifting: Abnormal alternating sequence

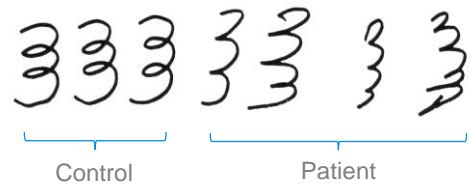


Perseveration

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Inhibition

- Go/No-Go task (1 tap – raise finger, 2 taps – stay still)
- Multiple loops



Control

Patient

Inhibition

- ◎ Go/No-Go task (1 tap – raise finger, 2 taps – stay still)
- ◎ Multiple loops
- ◎ Stroop color test

RED GREEN BLUE BLACK BLUE YELLOW GREEN RED

GREEN BLUE RED BLACK BLUE RED YELLOW BLUE

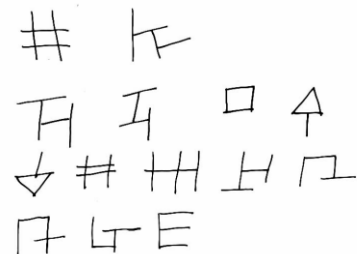
BLACK GREEN YELLOW BLUE RED BLUE YELLOW



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Fluency

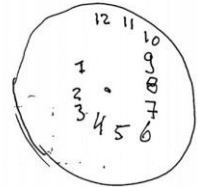
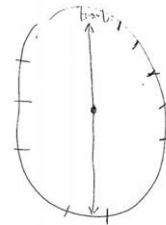
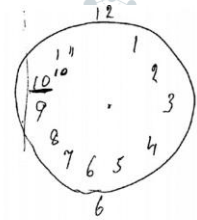
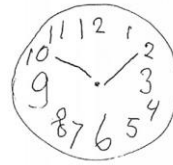
- ◎ The ability to maximize the production of verbal or visual information in a specific time period, while avoiding repeating response
- ◎ Verbal fluency (production in 1 minute)
 - ◎ Category (semantic) fluency
 - animal, province, etc
 - ◎ Letter (phonemic) fluency
 - Alphabet ก. ข.
- ◎ Nonverbal fluency
 - ◎ Design fluency



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Other tests of executive function

- ⊙ Clock drawing test
- ⊙ Abstract/ similarity



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Social cognition



Social cognition (DSM-5)

- Recognition of emotions
- Theory of mind

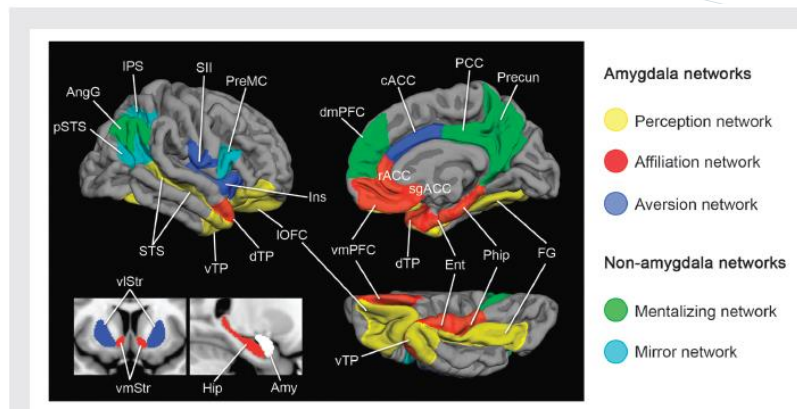
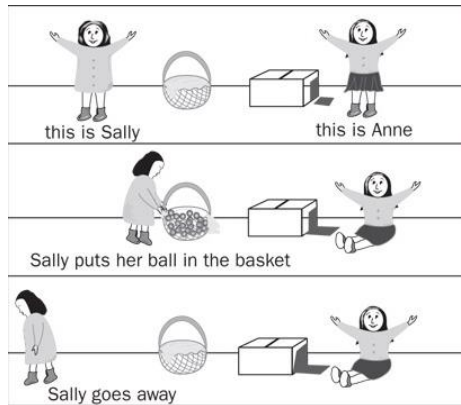


FIGURE 5-1 A schematic of five large-scale brain networks subserving processes important for social behavior. Three networks are anchored in the amygdala (amygdala-based networks) and two are not (control networks). The amygdala is displayed in white, indicating that it is the hub of the three amygdala-based networks.

Regions of Interest With Abbreviations

Perception network: IOFC = lateral orbitofrontal cortex; vTP = ventrolateral temporal pole; FG = fusiform gyrus; STS = superior temporal sulcus.
 Affiliation network: dTP = dorsomedial temporal pole; rACC = rostral anterior cingulate cortex; sgACC = subgenual anterior cingulate cortex; vmPFC = ventromedial prefrontal cortex; Ent = entorhinal cortex; Phip = parahippocampal cortex; vmStr = ventromedial striatum.
 Aversion network: cACC = caudal anterior cingulate cortex; Ins = insula; SII = somatosensory operculum; vIstr = ventrolateral striatum.
 Mentalizing network: dmPFC = dorsomedial prefrontal cortex; PCC = posterior cingulate cortex; Precun = precuneus; AngG = angular gyrus (temporoparietal junction).
 Mirror network: pSTS = posterior superior temporal sulcus; IPS = intraparietal sulcus; PreMC = premotor cortex.
 Hip = hippocampus; Amy = amygdala.

Mirroring and theory of mind



Theory of mind refers to one's awareness that other individuals experience thoughts or feelings that are distinct from one's own.

Tests of social cognition?

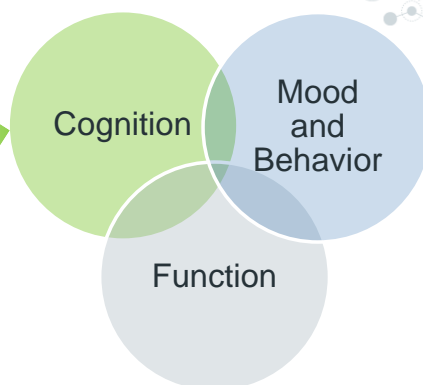
- ◎ History taking and observation
 - From informants
- ◎ Environmental dependence (the need to touch and feel things)

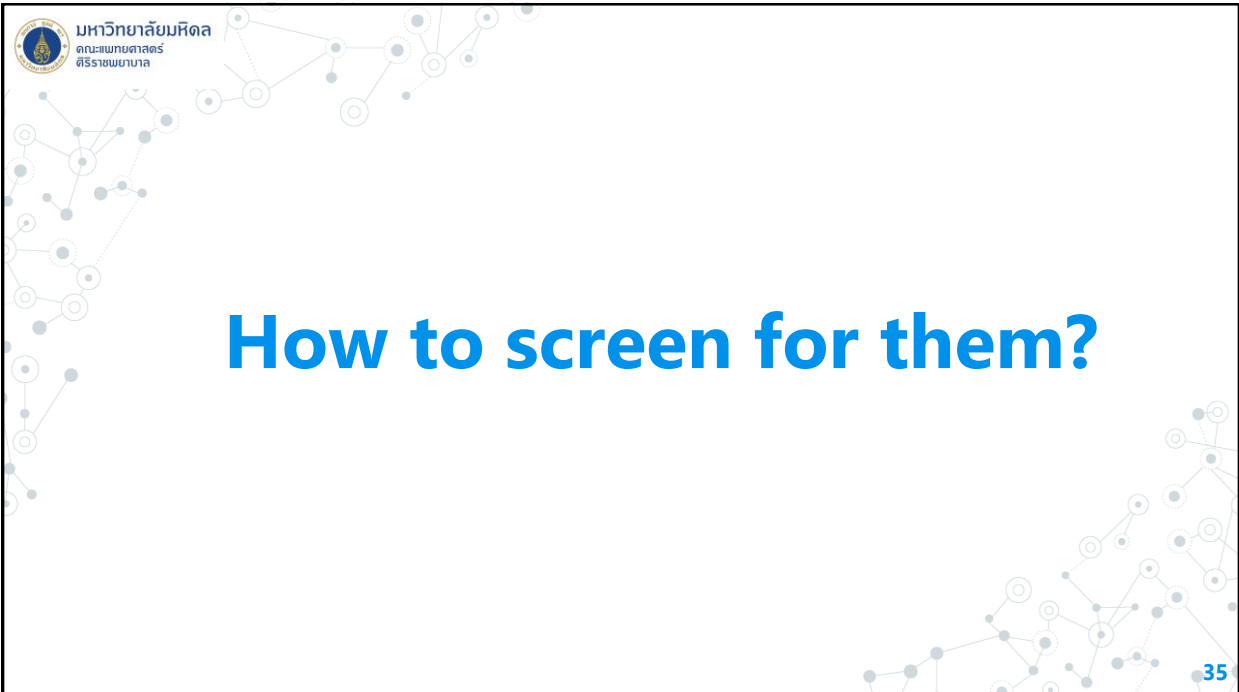
Dysfunction of social cognition

- ⊙ Mild
 - Has subtle changes in behavior or attitude, personality
 - Decreased empathy
 - Increased extraversion or introversion
 - Decreased inhibition
 - Apathy or restlessness
- ⊙ Severe
 - Behavior clearly out of acceptable social range
 - Focuses excessively on a topic despite group's disinterest or direct feedback
 - Makes decisions without regard to safety
 - Typically, has little insight into these changes

Scope of Neurobehavioral evaluation

- ⊙ Attention
- ⊙ Language
- ⊙ Perceptual-motor
- ⊙ Memory and learning
- ⊙ Executive function
- ⊙ Social cognition

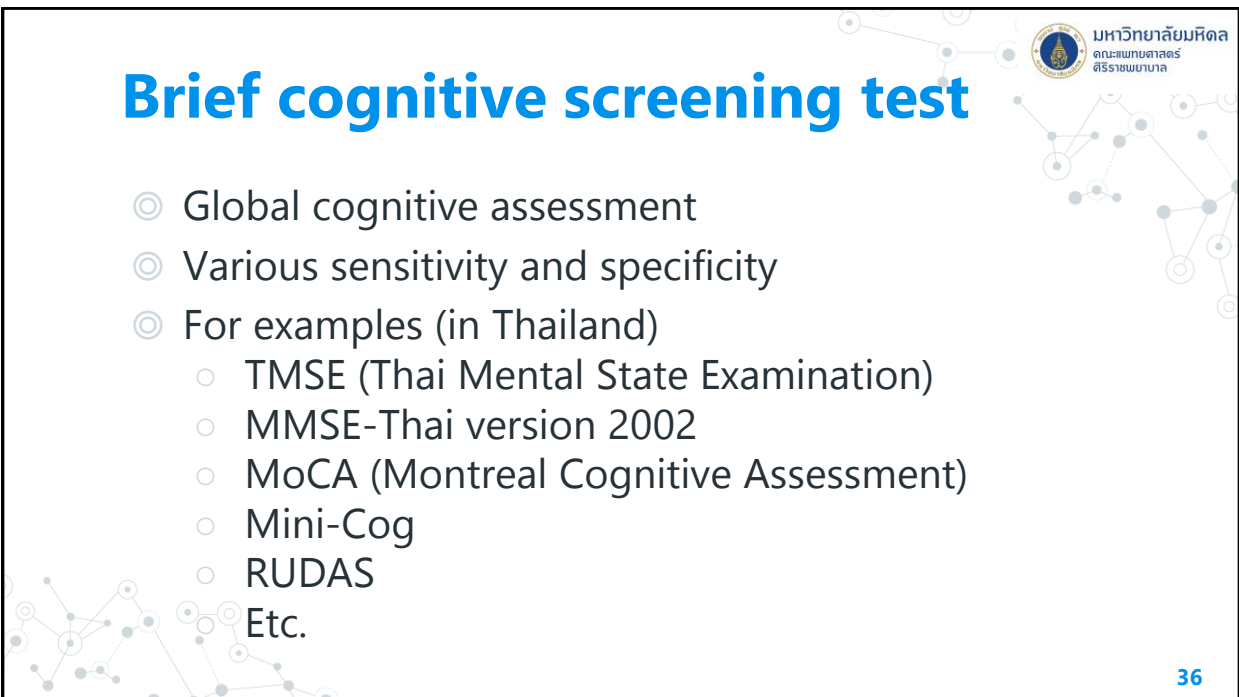




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How to screen for them?

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Brief cognitive screening test

- ◎ Global cognitive assessment
- ◎ Various sensitivity and specificity
- ◎ For examples (in Thailand)
 - TMSE (Thai Mental State Examination)
 - MMSE-Thai version 2002
 - MoCA (Montreal Cognitive Assessment)
 - Mini-Cog
 - RUDAS
 - Etc.

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Caution!

- ⊙ In the absence of the clinical history, **no single cognitive test can accurately diagnose all conditions**, as each test has some limitations in its sensitivity to detect abnormal function and limitations in specificity.
- ⊙ The **history obtained should guide the clinician on which cognitive assessment** to use.
- ⊙ Additional bedside test may be required.

Tang-Wai DF, et al. Continuum (Minneal Minn) 2018. 41

TABLE 1-1

Sample Comments From Collateral Historians and Disorders to Consider by Presenting Symptom

| First Symptom Noticed | Affected Cognitive Domain | Disorders to Consider |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Repeats him/herself; rapidly forgets conversations | Anterograde memory loss | Alzheimer disease |
| Cannot recall people he/she sees on the street; does not recognize familiar people at a party; cannot recognize his/her own house | Prosopagnosia | Semantic dementia variant of frontotemporal dementia |
| Cannot align things; has problems seeing, reading; blurry vision; cannot fill out a form; cannot find things in the refrigerator; cannot read a map; misplaces items; gets lost/geographic disorientation | Visuospatial dysfunction | Alzheimer disease (posterior cortical atrophy variant), dementia with Lewy bodies |
| Inability to fix things | Apraxia, executive dysfunction, visuospatial dysfunction, attentional dysfunction | Corticobasal syndrome, Alzheimer disease, dementia with Lewy bodies, vascular cognitive impairment |
| Forgets words; describes words, talks around them; mixes up words, mispronounces words; forgets what a word means | Language (anomia) | Primary progressive aphasia (nonfluent, logopenic, or semantic variants) |
| Sometimes able to do things and sometimes appears more confused and cannot do things | Attention (fluctuations) | Dementia with Lewy bodies |
| Cannot plan, multitask, or stay on task; must do everything in single steps, cannot combine tasks | Executive dysfunction | Alzheimer disease, vascular cognitive impairment, behavioral variant frontotemporal dementia (behavioral abnormalities must also be present for this diagnosis), dementia with Lewy bodies |

Tang-Wai DF, et al. Continuum (Minneal Minn) 2018. 42

Localization of cognitive deficit



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| Cognitive domain | Localization |
|-----------------------------------------------|----------------------------------------------------------------------|
| Executive function | Lateral prefrontal (left: task setting, right: monitoring) |
| Attention | Frontal |
| Language | |
| - Sentence repetition | - Left perisylvian area |
| - Naming | - Left temporal lobe for isolated naming deficits |
| - Reading, writing | - Left parietal/ inferior parietal lobule (in alexia with agraphia) |
| - Comprehension | - Left temporal-parietal |
| - Semantic knowledge | - Left temporal lobe |
| Visuospatial | Parital/ occipital/ temporal (may be frontal if drawing to command) |
| Memory | Temporal lobe/ hippocampus/ medial temporal, or dorsomedial thalamus |
| Calculation | Left parietal/ inferior parietal lobule |
| Loss of empathy, disinhibition, apathy | Prefrontal lobe, especially orbitofrontal and medial |

Adapted from: Tang-Wai DF, et al. Continuum (Minneal Minn) 2018. ⁴³

Cognitive Profiles/Patterns Seen on Cognitive Testing

TABLE 1-6

| Major Deficit Seen on Testing | Pattern | Example Conditions |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Orientation, delayed word recall | Amnesic | Mild cognitive impairment (amnesic), Alzheimer disease |
| Planning and monitoring, attention, sequencing (eg, three-step command), word list generation for letters | Executive dysfunction, frontal-subcortical dysfunction | Dementia with Lewy bodies, Parkinson disease dementia, vascular dementia |
| Drawing | Visuospatial impairment | Posterior cortical atrophy, dementia with Lewy bodies, corticobasal degeneration |
| Naming, repetition, writing | Aphasia | Primary progressive aphasia |
| Normal testing | Not applicable | Can be seen in behavioral variant frontotemporal dementia, subjective cognitive impairment |

Tang-Wai DF, et al. Continuum (Minneal Minn) 2018. ⁴⁴



“If the Human Brain Were So Simple That We Could Understand It, We Would Be So Simple That We Couldn’t”

Emerson M. Pugh

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Thank you!

Question?

You can find me at:
Chatchawan.rat@mahidol.ac.th

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