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SLEEP IN THE NEUROPSYCHIATRIC EVALUATION OF PATIENTS WITH DEMENTIA DUE TO ALZHEIMER’S DISEASE
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Objectives: To evaluate the amount of sleep of patients with Alzheimer’s disease, as well as which factors might influence their sleep patterns.

Methods: A total of 131 patients with dementia due to Alzheimer’s disease followed at the Behavioural Neurology Section of Hospital São Paulo, Escola Paulista de Medicina, Federal University of São Paulo – UNIFESP were tested by way of: Mini-Mental State Examination (MMSE), severe MMSE, 15-point Clock Drawing Test (CDT), Clinical Dementia Rating (CDR), Neuropsychiatric Inventory (NPI – version with 10 items), Katz’s (ADL) and Lawton’s (IADL) functional assessments, and the Brazilian Version of the Zarit Caregiver Burden Interview (ZBI). Schooling and cerebrovascular risk factors (systemic hypertension, diabetes mellitus, hypercholesterolemia, obesity) were also assessed. Patients had to answer if their sleep was pleasing, what factors might interfere with it, and the usual amount of time slept daily. Significance was set at $\rho<0.05$.

Results: Among all 131 patients, 88 were female (67.2%) and 43 were male (32.8%), 113 (86.2%) had systemic hypertension, 36 (27.5%) had diabetes mellitus, and 92 (70.2%) had hypercholesterolemia, all of them under treatment; mean weight was 63.7±12.9 kgf, mean height was 156.6±9.5 cm, mean waist circumference was 95.1±12.3 cm, and mean body mass index was 25.9±4.5 kg/m²; mean estimated age of Alzheimer’s disease onset was 71.9±6.6 years, mean schooling was 4.5±3.7 years, and mean scores for the tests were: MMSE 15.7±6.0; severe MMSE 26.4±4.3; CDT 6.0±4.6; CDR 1.8±0.7; NPI 21.6±16.6; ADL 4.8±1.7; IADL 13.9±5.1; and ZBI 15.5±10.5. Mean daily length of sleep was 8.9±1.8 hours; 24 patients (18.32%) reported unsatisfactory sleep, more often when they slept for less than 8 hours per day ($\rho=0.016$). Mean age at Alzheimer’s disease onset ($\rho=0.529$), cerebrovascular risk, gender ($\rho=0.366$), and scores for MMSE ($\rho=0.809$), severe MMSE ($\rho=0.294$), CDT ($\rho=0.942$), CDR ($\rho=0.696$), ZBI ($\rho=0.106$), ADL ($\rho=0.622$) and IADL ($\rho=0.072$) were not predictive of sleep disorders. Higher NPI scores ($\rho=0.003$) and less than 4 years of schooling ($\rho=0.024$) predicted reports of unsatisfactory sleep.

Conclusion: Low schooling impacts the evolution of patients with Alzheimer’s disease as much as their sleep patterns, which are also affected by neuropsychiatric symptoms; satisfactory sleep seems to be related to its length for these patients.