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ABSTRACTS

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ELDERLY AND EARTHQUAKE (THE INTERVENTION OF HUB AND SPOKE PROJECT OPERATORS IN THE COMMUNITIES OF THE CRATER OF THE PROVINCE OF TERAMO (AFTER THE EARTHQUAKE)

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In this work AAs. want to illustrate their intervention in the craters of the Province of Teramo, affected by the earthquake of October 30, 2016. The post-earthquake emergency has highlighted the conditions of the elderly frail, especially those who are predominantly affected by dementia and Alzheimer's illness who are about 9,000 in the entire Teramo Province, of which more than 1,200 were followed at home within the Hub and Spoke Project. Since the early days of the emergency in the communities most affected by the earthquake, the project's perpetrators were medical, psychologists, social workers and nurses. The elderly were afraid, anxious, but above all the struggle against the instability of the situation and the terror of a new possible shock (mostly almost safe and intense than the 30/10) were almost impossible to sustain emotionally and psychologically. The biggest problem encountered in the gap between the damaged houses was the collection centers that the elders did not want to abandon their world, their habits and their homes, even if they were destroyed. Many of them refused to visit their homes with Vigilants and Civil Protection Operators for the fear of having to abandon their homes often resulting from the sacrifices of a lifetime. The biggest problem encountered by Hub and Spoke project operators was to help older people overcome depression because of the post-earthquake conditions that represented a total eradication for them, moving them away from places that represented their environment, all of them, their identity, and therefore did not want to leave, because for them this meant almost dying. The interventions were mainly tied to them, without exerting any pressure, inviting them to react, to understand the situation and sometimes to persuade them to leave their own countries trying to make it clear that this was not a detachment from reality. AAs. unfortunately, in their intervention, showed an increase in depressive states, confusional states, and a strangely significant number of femoral fractures.

TRIPACTKEL (KELATROX TM) IN VASCULAR SUB-CORTICAL DEMENTIA

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Vascular sub-cortical dementia (VSCD) is characterised by an overt clinical picture of cerebro-vascular disease with focal neurological signs and cognitive impairment, representing a decline of the subject abilities respect a more elevated former level of functioning. Imaging shows cerebral atrophy mainly sub-cortical and multiple lacunae in white matter. TripActKel is a complex based on Quercitrin, Baicalin and Curcuminoids. There are numerous scientific evidence on the chelating activity of these substances on metals (iron, copper, aluminium). The compound also possesses antioxidant properties [1].

Objective: The present preliminary study aims to evaluate the effect on cognitive performance of a therapy b.i.d. of TRIPACTKEL, in a group of de novo pts of VSCD. The improvement of partial and/or global scores at an exhaustive neuro-psychological testing at T0 and T1 (six months) was the end point.

Patients: 14 consecutive VSCD pts, 63-75 y (mean 69), 5 M-9 F, were enrolled to the study. All had clinical neurological signs and cognitive impairment and met diagnostic criteria for VSCD following Erkinjuntti et al. [2] and had grade 1-2 at Fazekas MRI criteria (revised and simplified by Pantoni et al. [3]).

Methods: Mini Mental State Examination (M.M.S.E.) was chosen for the global cognitive evaluation. To explore long term memory and recall was administered the Rey's 15 words test. To evaluate space orientation Rey's picture test (copy and recall) was done. The assessment of logical-executive functions was performed with the P.M. 47 Raven test.

Results: Although the average scores for MMSE resulted at the limits of the norm (MMSE scored between 17 and 24) at T0, the yield in individual subtests at T0, particularly in those that explore the memory of re-evocation and the visual space organization was frankly deficitary.

Discussion: The possibility that a compound with chelation and antioxidant properties can improve cognitive performance in a population of patients with VSCD is suggestive. The data from our study would confirm this hypothesis. At T1 long term memory and spatial organisation seem better respond to the treatment, more than logical-executive functions, that showed only a slight improvement.

Conclusions: So far this is the first study, at least according to our knowledge, on a chelating-antioxidant compound with the aim of improving cognitive performance in patients with VSCD. The data obtained are very impressive. These data, although still preliminary, encourage and suggest us to promote a prospective study on a wider population to enhance the statistical significance of these results.

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USE OF NEUROLEPTICS IN PATIENTS WITH DEMENTIA: CLINICAL EXPERIENCE IN A GROUP OF PATIENTS ADMITTED TO AN OUTPATIENTS DEMENTIA CLINIC OF AZIENDA SANITARIA LOCALE RM2

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Recent national and international guidelines recommend the use of neuroleptic drugs as the last option for patients with dementia and behavioural disturbances, to be prescribed only after the failure of behavioural treatments. This is due to the low tolerability and safety profile of this class of drugs in the elderly patient, with high mortality index and significant increase of cerebro-vascular disease incidence. In spite of these clear-cut recommendations and clinical evidence, the recent report on the use of drugs of AIFA in 2015, shows a significant increase of use (+38%) with the highest cost per patient (+54%) ever. In order to evaluate the prescriptions of typical and atypical neuroleptic in our series of patients with dementia, we have calculated the number of patients treated with these drugs within the period of May 2014 and May 2016. Data have been gathered through the notes sent to our local pharmaceutical service and the schedule of the prescription (all drugs where dispensed directly to the patients during the visit). Of 190 patients followed in the dementia centre, only 17 were prescribed antipsychotics (11 females 6 males, mean age 80.4 years +9.4). Fifteen had been diagnosed Alzheimer disease, one Lewy body dementia and one post-stroke dementia; 10 were out patients and 7 followed-

TRIPACTKEL (KELATROX™) IN VASCULAR SUB-CORTICAL DEMENTIA: A PRELIMINARY STUDY

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Introduction

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Methods

The present preliminary study aims to evaluate the effect on cognitive performance of a therapy *b.i.d.* of TRIPACTKEL, in a group of *de novo* pts of VSCD. The improvement of partial and/or global scores at an exhaustive neuro-psychological testing at To and T1 (six months) was the end point. 14 consecutive VSCD pts, 63-75 y (mean 69), 5 M-9 F, were enrolled to the study. All had clinical neurological signs and cognitive impairment and met diagnostic criteria for VSCD following Erkinjuntti et al.[2], 2000 and had grade 1-2 at Fazekas MRI criteria (revised and simplified by Pantoni et al.[3], 2002).
Mini Mental State Examination (M.M.S.E.) was chosen for the global cognitive evaluation. To explore long term memory and recall was administered the Rey's 15 words test. To evaluate space orientation Rey's picture test (copy and recall) was done. The assessment of logical-executive functions was performed with the P.M. 47 Raven test.

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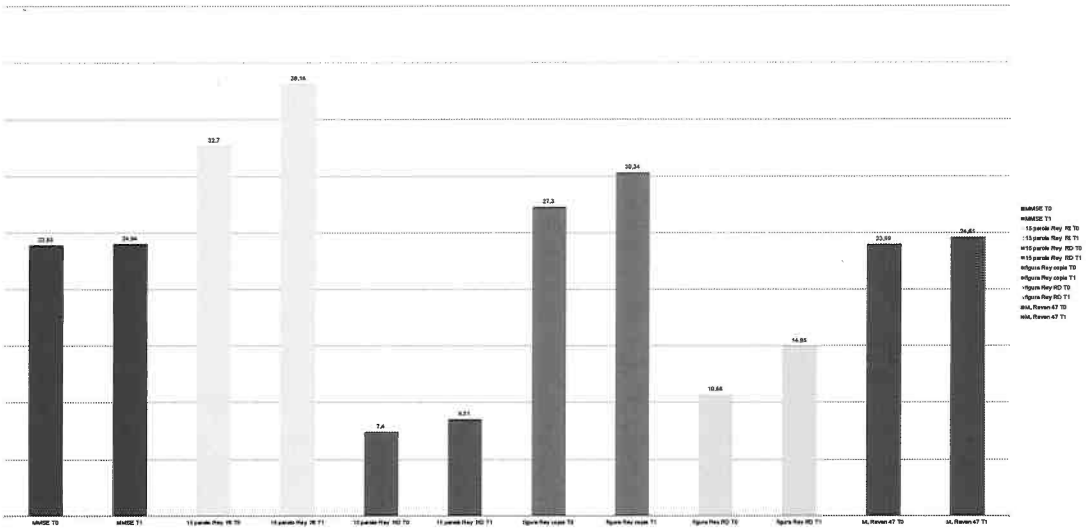
Conclusion

The possibility that a compound with chelating and antioxidant properties can improve cognitive performance in a population of patients with VSCD is suggestive. The data from our study would confirm this hypothesis.
So far this is the first study, at least according to our knowledge, on a chelating-antioxidant compound with the aim of improving cognitive performance in patients with VSCD. The data obtained are very impressive. These data, although still preliminary, encourage and suggest us to promote a prospective study on a wider population to enhance the statistical significance of these results.



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