

 "Nicolae Testemitanu" State University of Medicine and Pharmacy, Department of Medical rehabilitation, physical medicine and manual therapy, Chisinau, Republic of Moldova
Institute of Neurology and Neurosurgery "Diomid Gherman", Chisinau, Republic of Moldova

Abstract

Introduction. Cognitive and mood disorders after stroke are common comorbidities being associated with poor rehabilitation outcomes. At the same time, these conditions can overlap and cause low level of functioning in stroke patients.

The purpose of the study was to evaluate the incidence and distinctive profile of cognitive and mood disorders and its impact on rehabilitation outcomes.

Material and methods. Individuals (N=60) with stroke admitted in the department of Neurological Rehabilitation of the Institute of Neurology and Neurosurgery, Chisinau, Republic of Moldova were evaluated using Montreal Cognitive Assessment Scale (MoCA), The Hospital Anxiety and Depression Scale (HADS), and Barthel Index at admission and discharge.

Results. Cognitive dysfunction in post stroke rehab have been registered in 87 % (mild -27%, moderate -38 %, severe forms – 22 %) with average MoCA score of 17.18 points (SD \pm 7,4). The most affected area of cognitive function was visuospatial perception, memory and attention. Functional outcomes measured by difference of Barthel Index at admission and discharge are higher in persons with higher cognitive score (Pearson's r =+0.65). Anxiety and depression were present in 30 % and 35 % of study group having a mean score of 9.6 for anxiety (SD \pm 5,6) and 8.9 for depression (SD \pm 3,56). A negative correlation between depression score vs anxiety score and functional outcomes were registered with a stronger statistical significance for depression (Pearson's r=-0.59 versus -0.31)

Conclusions. Cognitive intervention for training of visual perception, attention and memory can improve functional outcomes for post stroke rehabilitation. Cognitive and mood disorder occur frequently as comorbidities in stroke and have to be considered by the multidisciplinary team.

Key words: cognitive disorders, anxiety, depression, post-stroke rehabilitation