

## L50 - The impact of cognitive decline on stroke rehabilitation

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### Abstract

**Introduction.** Stroke is a disease of great public importance, the second leading cause of death and the third leading cause of disability. The persistent and progressive decline of cognitive function in stroke survivors has a major impact on the patient's health and quality of life, with repercussions affecting the whole society. There is no cure for cognitive impairment or dementia, apart from the non pharmacological treatment: the rehabilitation, which may be an important effective alternative.

**Materials and methods.** The study was retrospective for a period of 6 months. The patient population consisted of 60 individuals. Their primary diagnosis was stroke and the secondary being dementia. Patient assessment was done by clinical, imagistic and psychiatric examination. In addition, an analysis of randomized controlled data trials from the literature, on cognitive rehabilitation had been performed.

**Results and discussions.** The results show that 58% of patients were diagnosed with mixed dementia and 61% had this diagnosis before brain damage occurred, with a Mini Mental State Examination under 20 points. The most common disorders of cognition were: fixation hipomnesia, temporal-spatial disorientation, impaired computing. Dementia patients have different rehabilitation needs and associate a lower functional result than those without cognitive impairments. For a rehabilitation benefit patients should be able to recover their skills step by step and carry them over to the next session, which is difficult for people with severe memory problems. They have a low potential for progress and require a long time and many resources to advance with neurorehabilitation.

**Conclusions.** The brain injury, such as stroke, causes damage of motor and cognitive functions with repercussion on quality of life. The cognitive decline associated with stroke is an important aspect of neurorehabilitation. Nevertheless is slightly neglected to the detriment of physical disability as there is a lack of recovery potential in these patients.

**Key words:** *dementia, stroke, cognitive, neurorehabilitation*