conferenceseries.com

4th Global Congress on NEUROSCIENCE PSYCHIATRY AND MENTAL DISORDER

November 18-19, 2024 | Paris, France

Essential new complex-based themes for patient-centered diagnosis, treatment, rehabilitation and prevention of dementia in the elderly- A new therapeutic horizon

Eli Wertman

The Hebrew University, Israel

Dementia is a highly prevalent condition with devastating clinical and socioeconomic sequela. It is expected to triple in prevalence by 2050. Neither treating etiological medical conditions nor disease-modifying treatment and preventive treatment are currently known to be effective. Symptomatic late-onset dementia and Predementia (SLODP) affects above 95% of patients with the syndrome. SLODP is a specific nosological entity. Interestingly, SLODP but not young onset dementia is intensely associated with Multimorbidity (MUM), including brain-perturbating conditions (BPCs). MUM and BPCs have a major role in the pathogenesis of SLODP. Most MUM/BPCs are medically treatable and known to affect the brain. Thus, their treatment may remediate SLODP, relieving suffering and reducing its clinical and socioeconomic threats. SLODP is extremely clinically multifactorial and complex due to its Multimorbidity with multiple co-existent medical and environmental psychosocial conditions, and concomitant cognitive, behavioral, and functional syndromes and sub-syndromes with intensive dynamics and clinical heterogeneity. The current diagnostic approach ignores this complexity and concentrates on its observed Emergent Behavior. This results in reductionist dyadic unifactorial etiological-phenomenological diagnosis that misses MUM/BPCs etiological treatable conditions. This explains why the rate of diagnosed remediable conditions is so low. The complex system features of SLODP impede the diagnosis and treatment of the potentially remediable conditions associated with them, mainly due to failure of pattern recognition and a flawed diagnostic workup. We suggest incorporating two SLODP-specific conceptual themes into the diagnostic workup: MUM/BPC and multilevel phenomenological themes. By doing so, we were able to improve the diagnostic accuracy of SLODP components and optimize detecting and favorably treating PRCs. These revolutionary concepts and their implications for remediability are dependent on intensive information gathering, deep-knowledge medical reasoning, and dedicated case management. The complex-system approach, has implications for changing clinical attitudes to SLODP (updating diagnostic criteria, Multimorbidity treatment guidelines, and functional rehabilitation), research, and promising education.

Biography

Eli Wertman, M.D., is a distinguished neurologist based at the Department of Neurology at Hadassah University Hospital, affiliated with The Hebrew University in Jerusalem, Israel. With extensive expertise in neurological research and patient care, Dr. Wertman is recognized for his contributions to advancing the understanding and treatment of complex neurological disorders. His dedication to academic excellence and clinical innovation underscores his leadership in the field of neurology.