

Brief Cognitive Screener Detects Early Signs of Cognitive Decline in Anglo and Hispanic Patients

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It is estimated that the number of Americans aged ≥ 65 —the segment of the population at greatest risk for developing neurocognitive disorders—will nearly double from 52 million in 2018 to 95 million by 2060, and their prevalence in the total population will increase from 16% to 23%.^{1,2} Many of these individuals have already begun demonstrating signs of cognitive dysfunction but

have not yet been assessed for dementia—even those who have had recent contact with their physicians.³ Therefore, rapid detection of excessive cognitive decline is critical to provide earliest possible intervention aimed at mitigating functional decline, psychosocial hardship, and excess health care expenditure.

The South Florida Cognitive Screener (SFCS; Figure 1) is an 8-item

self-report instrument that takes less than 3 minutes to complete. The SFCS was developed to capture the most common cognitive, functional, and behavioral complaints typically reported early in the process of cognitive decline. We administered the SFCS to 1,676 consecutive patients, aged ≥ 55 , who were referred to an outpatient neurology practice in South Florida for routine cognitive assessment due to memory complaints (mean age [SD] = 73.8 [8.4]; sex, female = 980 (58.5%). We found that the SFCS correlates with the widely used cognitive screener, the Mini-Mental State Examination (MMSE)⁴ ($r = -0.214$, $P < .001$). Furthermore, a total score of 5 on the SFCS correlates with a MMSE score ≤ 25 , generally considered to be the cutoff for cognitive impairment in a geriatric population. The SFCS was then translated into Spanish (SFCS-Esp) by a group of Hispanic practitioners representing various Latin American countries and who arrived at item consensus to minimize dialectical issues frequently encountered across Hispanic subgroups. Both English and Spanish formats demonstrate similar properties, with inverse-negative correlations with the MMSE (SFCS-Eng: $N = 856$, $r = -0.183$, $P < .001$; SFCS-Esp: $N = 816$, $r = -0.236$, $P < .001$).

To date, the SFCS and SFCS-Esp have been administered extensively

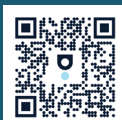
Figure 1. South Florida Cognitive Screener/South Florida Cognitive Screener–Español^a

South Florida Cognitive Screener (SFCS)		Yes (1)	No (0)
1.	Are you concerned about your memory?		
2.	Has any friend or family member made a comment about your memory?		
3.	Have you noticed any changes in language or in your ability to express yourself?		
4.	Have you been losing or misplacing things more frequently than before?		
5.	Have you become confused about the date?		
6.	Have you gotten lost while in a familiar area?		
7.	Are you more irritable than usual?		
8.	Has a friend or family member told you that you are more irritable?		
Total Score			

South Florida Cognitive Screener–Español (SFCS-Esp)		Si (1)	No (0)
1.	¿Está usted preocupado por su memoria?		
2.	¿Un amigo/a o familiar le ha dicho que se le están olvidando las cosas más frecuentemente?		
3.	¿Ha notado cambios en su lenguaje, por ejemplo en su habilidad para expresarse o encontrar palabras?		
4.	¿Se le están perdiendo las cosas más frecuentemente?		
5.	¿Tiene problemas sabiendo que día es o en que día está?		
6.	¿En algún momento se ha perdido en un lugar conocido para usted?		
7.	¿Está usted más irritable que de costumbre?		
8.	¿Un amigo/a o familiar le ha dicho que está más irritable que de costumbre?		
Puntuación Total			

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in both primary care and neurologic settings. It has proved effective in detecting early manifestations of cognitive decline and serving as a catalyst for physicians to efficiently review and discuss cognitive status to better detect the presence of emerging dementia. We encourage physicians to incorporate this brief screening tool into their clinical practice.

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