

Stepwise approach effective for primary care dementia screening

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years, incident dementia ranged from 4 to 30 percent among persons with SMCs, depending on MMSE-5 and VAT scores. In patients with SMCs, the strength of the association between future dementia and an imperfect MMSE-5 score largely depended on the VAT score.

"Assessing SMC in combination with the MMSE delayed recall item and the VAT appears to be a promising way to assess dementia risk in [primary care](#)," the authors write.

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Assessment of dementia risk using three common screening tools at baseline predicts incident dementia over the course of about seven years, according to a study published in the September/October issue of the *Annals of Family Medicine*.

Lennard L. van Wanrooij, from the University of Amsterdam, and colleagues used data from 3,454 community-dwelling [older persons](#) who participated in the six- to eight-year Prevention of Dementia by Intensive Vascular Care trial to evaluate the associations between incident [dementia](#), responses to a single question regarding subjective memory complaints (SMCs), and combined scores on two simple memory tests.

The researchers found that SMCs alone were associated with future dementia (hazard ratio, 3.01), as were the Mini-Mental State Examination delayed recall item (MMSE-5; hazard ratio, 2.14) and the Visual Association Test (VAT; hazard ratio, 3.19) scores. During a median follow-up of 6.7

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