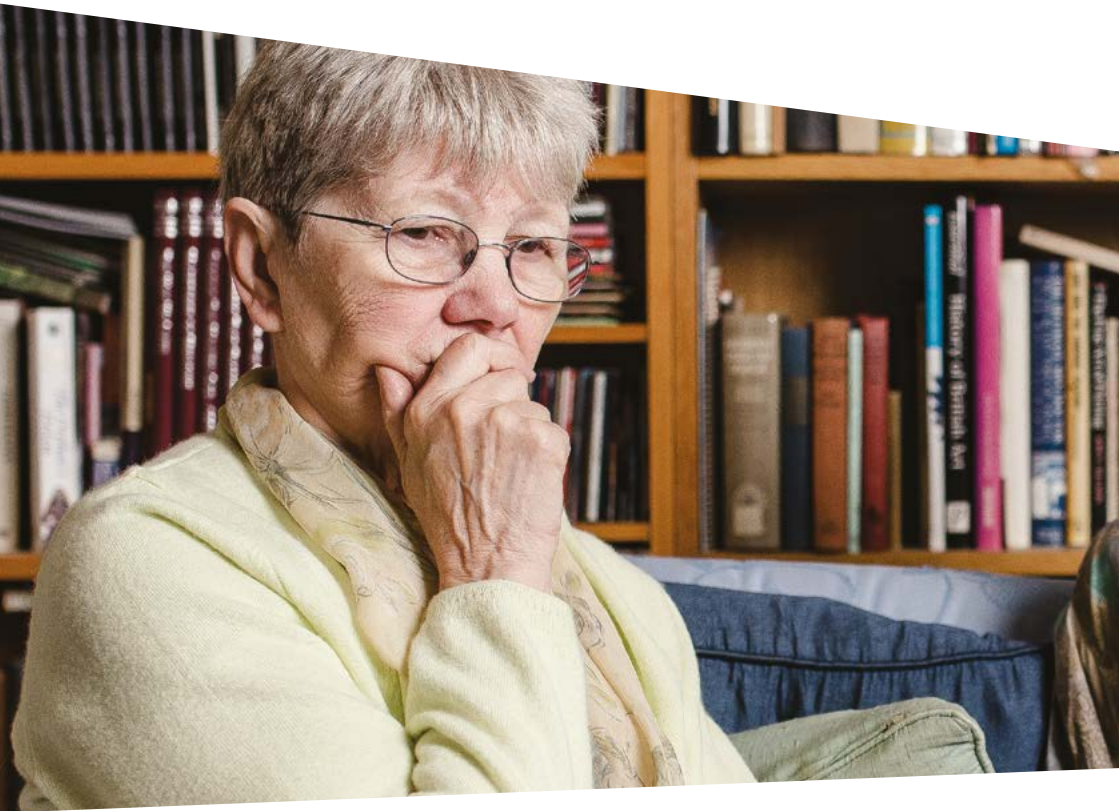


What is mild cognitive impairment?





This booklet aims to help you understand mild cognitive impairment. It's for anyone who might be worried about their own or someone else's memory.

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The information here does not replace any advice that doctors, pharmacists or nurses may give you, but provides some background information we hope you will find helpful.

The booklet was updated in November 2019 and is due to be reviewed in November 2021. Please get in touch if you'd like a version with references or in a different format.

What is mild cognitive impairment?

Mild cognitive impairment (MCI) is a term used to describe early memory and thinking problems in older people. It is not a type of dementia.



While many people notice a natural decline in memory and thinking as they get older, people with MCI experience difficulties that are greater than expected for their age. However, unlike dementia, these difficulties tend not to get in the way of a person's day-to-day life.

MCI can be caused by a range of existing conditions and may or may not get worse. One cause of MCI can be the early stages of Alzheimer's disease or another form of dementia. However, other conditions such as depression, low vitamin levels and thyroid problems can also cause similar mild memory difficulties.

Some people with MCI find that their symptoms stay the same or return to normal. MCI does not necessarily lead to dementia.

We do not have a clear picture of how many people have MCI. Research has suggested that one or two in every 10 people over 65 may have MCI. However, it is not always easy for a doctor to diagnose MCI, so it's hard to know exactly how many people are affected.

What's the difference between MCI and dementia?

The word dementia describes a group of symptoms that can affect a person's ability to carry out daily activities without help.

These include memory problems, confusion and mood changes. A person with dementia will usually have two or more of these symptoms, such as problems with their memory or getting lost. Someone with MCI may have only one of these symptoms and unlike dementia, it would normally be too mild to get in the way of day-to-day life.



Does MCI lead to dementia?

Having MCI raises your risk of developing dementia in future, even if your symptoms get better over time. However, it's not yet clear how many people with MCI go on to develop dementia.

Some studies suggest that each year, around one in 10 people with a diagnosis of MCI develop dementia. For people who do develop dementia, the time this takes can vary from one person to another.

Factors such as older age, depression, diabetes, smoking and high blood pressure may increase the likelihood that someone with MCI will go on to develop a form of dementia like Alzheimer's disease. People with MCI who have a risk gene called APOE4 have a higher risk of developing Alzheimer's. Having this gene may also increase the risk of developing MCI in the first place.

Symptoms

The symptoms of MCI do not normally affect daily life very much. This means that someone with MCI, or those around them, may not notice the signs at first.



These symptoms may include:



Memory

Misplacing items or having trouble remembering recent conversations.



Attention

Finding it difficult to concentrate, e.g. following the story of a TV programme, or working on a hobby.



Disorientation

Confusion about time and place.



Thinking skills

Problems with planning, reasoning or completing tasks, e.g. managing money, or cooking a balanced meal.



Language

Problems finding the right words.



Mood and behaviour

Some people become irritable, anxious or low in mood.

Diagnosis

Diagnosing MCI means you can get the right help and support to plan for the future, if necessary. You may also be able to take part in vital research.

You should talk to your doctor if you are worried about your memory or thinking skills, or someone else's.

When you visit your doctor, they may:



Ask about your medical history and your daily life.



Give you a physical check-up including blood tests.



Run through some pen-and-paper tests with you, to check your memory and thinking skills.

Your doctor may decide that your symptoms are due to another condition such as depression, anxiety, vitamin deficiency or thyroid problems. If this is the case, they will be able to provide the best course of treatment.

If the doctor feels you may have MCI, they can refer you to a memory clinic or other specialist clinic for further tests, which may include a brain scan. If you are diagnosed with MCI, your doctor can discuss what this means for you. You can continue to make decisions for yourself and carry on with the activities you enjoy.

As people with MCI have a higher risk of developing dementia, your doctor may arrange follow-up visits to see if your symptoms get worse over time. If they do get worse, they may ask you back to the memory clinic for further tests.

Unlike dementia, if you are diagnosed with MCI you may not have to tell the Driver and Vehicle Licensing Agency (DVLA). However, if you feel your symptoms are affecting your driving, you should inform the DVLA who will review your case. If you are unsure, you should discuss this with your doctor.



Treatments

There are currently no drug treatments available specifically for MCI.

In research studies, the medicines available for Alzheimer's disease have not been shown to help people with MCI. These treatments also do not appear to affect whether someone with MCI will go on to develop Alzheimer's or another form of dementia.

A doctor may treat any conditions such as diabetes or high blood pressure that could make the symptoms worse.

Research is looking into non-drug treatments for MCI, such as memory training and computer-based activities. So far, the results have been mixed. The doctor may be able to suggest practical tips to help you manage your symptoms, like keeping a calendar or diary. They might also suggest ways to keep physically and mentally active, such as taking regular exercise.

As some people with MCI may be in the early stages of a disease like Alzheimer's, researchers are keen to find out whether possible new treatments for dementia could work in people with MCI. To find out more about taking part in clinical trials or other research studies, visit www.joindementiaresearch.nihr.ac.uk or call the **Dementia Research Infoline** on **0300 111 5 111**.

Reducing the risk of MCI

There is no sure-fire way to prevent MCI, and research is underway to learn more about the risk factors for the condition.

However, there are steps we can take to keep our brains as healthy as possible. These can help reduce the risk of dementia and may also reduce the likelihood of developing MCI.

These include:



not smoking



staying mentally and physically active



eating healthily



limiting the amount of alcohol we drink



keeping blood pressure, blood sugar and cholesterol levels in check.

Further information about the risk factors for dementia can be found in our booklet '[Reducing your risk of dementia](#)'.

Support

There is help and support available for those worried about or affected by MCI or dementia.

The **Admiral Nurse Dementia Helpline** offers practical advice and emotional support to people affected by MCI and dementia and those worried about getting a diagnosis. Call **0800 888 6678**.

Alzheimer's Society provides information and services in England, Wales and Northern Ireland. Call **0300 222 1122**.

Alzheimer Scotland provides advice and local services in Scotland. Call **0808 808 3000**.

Research

Research is underway to understand the risk factors for MCI as well as identifying those with the condition who are most likely to go on to develop dementia.



Through research we'll bring about breakthroughs that will change lives. Thanks to the generosity of our supporters, we will fund many more pioneering studies into MCI and dementia.



Find out more

If you have questions about dementia research or want to find out more about how to get involved, contact our **Dementia Research Infoline** on **0300 111 5 111** or email **infoline@alzheimersresearchuk.org**

The Infoline operates 9.00-5.00pm Monday to Friday. Calls cost no more than national rate calls to 01 or 02 numbers and should be included in any free call packages.

Freeport RTYR-ZUUZ-AULL
Partridges
3 Eagle Avenue
Magnetic Park
Desborough
NN14 2WD



Send me more information

For free information, simply complete this slip and drop it straight in a post box. Alternatively, phone us on **0300 111 5555**.

I would like to know more about

Dementia: symptoms, diagnosis, causes and risk reduction (SCIHIAAD)

Reducing your risk of dementia (SCIHIRISK)

Support for people affected by dementia: organisations that can help (SCIHCARE)

The latest dementia research (SMTTHINK)

Name

Address

Email

We'd like you to be the first to know about the latest research and how your support makes a difference, as well as ways you can get involved and help fund our life-changing work. We'll keep your information safe and never sell or swap it with anyone.

Let us know how we can contact you (tick below):

Post Email Telephone Text message

You can change how we talk to you at any time, by calling **0300 111 5555** or emailing enquiries@alzheimersresearchuk.org

Our Privacy Notice can be found at www.alzheimersresearchuk.org/privacy-policy and explains how we will use and store your information.

MCI

We are the UK's leading dementia research charity dedicated to making life-changing breakthroughs in diagnosis, prevention, treatment and cure.

We welcome your comments to help us produce the best information for you. You can let us know what you think about this booklet by contacting us using the details below.



Contact us

Alzheimer's Research UK
3 Riverside, Granta Park, Cambridge CB21 6AD



Supporter care

T: 0300 111 5555

E: enquiries@alzheimersresearchuk.org



Dementia Research Infoline

T: 0300 111 5 111

E: infoline@alzheimersresearchuk.org

www.alzheimersresearchuk.org



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