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**Cognitive screening for adult psychiatric outpatients: Comparison of the Cognivue® to the Montreal Cognitive Assessment**

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In an editorial published in the World Journal of Psychiatry (2021) we compared the use of the Cognivue® to use of the Montreal Cognitive Assessment (MoCA) as cognitive screening tools. We focused on the importance of utilizing psychometrically valid cognitive screening tools when assessing for cognitive decline in older adults in a psychiatric outpatient setting. A total of 58 patients aged 55 and over participated in this comparison study. Patients completed cognitive screening on Cognivue®, a new Food and Drug Administration-cleared computer screening device, and the MoCA. The results of patient performance using these two instruments were analyzed. Sixteen (28%) patients screened negative for cognitive impairment on both assessments. Forty-two (72%) patients screened positive on one or both of the assessments. There was 43% agreement between Cognivue® and the MoCA in identifying patients with cognitive impairment, and individual subtests were weakly correlated. The MoCA was determined to be the preferred instrument due to its high sensitivity and specificity (100% and 87%, respectively) when screening for cognitive impairment. We propose that the use of Cognivue® cognitive screening tool be closely reviewed until more research proves that the test meets the standards for reliability and validity. It is important for clinicians to remember that screeners should not be used to diagnosis patients with neurocognitive disorders; instead, they

should be used to determine whether further evaluation is warranted. Additionally, misdiagnosing of neurocognitive disorders can pose unnecessary psychological and emotional harm to patients and their families and also lead to incorrect treatment and undue healthcare costs.

**References**

1. United State Food and Drug Administration. Device Approvals, Denials and Clearances [cited 20 April 2021].
2. Ranjit, Eukesh et al. "Cognitive Assessment of Geriatric Patients in Primary Care Settings." Cureus vol. 12,9 e10443. 14 Sep. 2020,
3. American Psychological Association. "Guidelines for the evaluation of dementia and age-related cognitive change." The American psychologist vol. 67,1 (2012): 1-9.

**Biography**

Amanda F Rose completed her Doctorate in Psychology (PsyD) at Wright State University, USA. She is currently a Clinical Psychologist at Cleveland Clinic Akron General, USA and a Psychology Consultant at Akron Children's Hospital working with adult burn patients. She is an Instructor Of Psychiatry at Northeast Ohio Medical University. Her research has focused on neurocognitive functioning in adult psychiatric patients and improving quality of care in outpatient mental healthcare facilities. Additionally, she serves as an editorial board member for Frontiers in Psychiatry.

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