Posterior Cortical Atrophy Phenotype of Alzheimer's Dementia: A Case Report

Authors : Joana Beyer

Abstract : Background: Alzheimer's disease (AD) is the predominant cause of dementia, characterized by progressive cognitive decline. Posterior cortical atrophy (PCA) is a less common variant of AD, primarily affecting younger individuals and presenting with visual, visuospatial, and visuoperceptual deficits, often leading to delayed diagnosis due to its atypical presentation. Case Presentation: We report the case of a 58-year-old woman referred to psychiatric services with a two-year history of progressive visuospatial decline, mild memory difficulties, and language impairments, notably anomia. Despite undergoing cataract and squint surgeries, her visual symptoms persisted, impacting her professional life as a music educator. The neuropsychological evaluation revealed profound visuoperceptual and visuospatial disturbances, with neuroimaging supporting a diagnosis of PCA. Treatment with Donepezil showed symptom improvement, highlighting the challenges and importance of early intervention and managing this atypical form of AD. Methods: The diagnostic process involved comprehensive physical, neuropsychological assessments, and neuroimaging, including MRI and F18 FDG PET CT, which demonstrated severe bilateral posterior cortical involvement. The case underscores the utility of these modalities in diagnosing PCA. Results: The initiation of Donepezil, an acetylcholinesterase inhibitor, resulted in symptom improvement, emphasizing the potential for AD treatments to benefit PCA patients. However, challenges in management, including treatment side effects and the necessity of multidisciplinary care, are discussed. Conclusion: This case highlights PCA's diagnostic challenges due to its atypical presentation and the broader implications for managing younger patients with early-onset dementia. It underscores the necessity for early recognition, comprehensive assessment, and tailored management strategies, including both pharmacological and non-pharmacological interventions, to improve patients' quality of life. Additionally, the case illustrates the need for expanding community memory services to accommodate younger patients with atypical forms of dementia, advocating for a more inclusive approach to dementia care.

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