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Standardized low-resolution brain electromagnetic tomography (sLORETA) in the prediction of response to cholinesterase inhibitors in patients with Alzheimer's disease

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Background

We tried to identify subgroup of patients with Alzheimer's disease (AD) benefiting from cholinesterase inhibitors (ChEI) treatment using standardized low-resolution brain electromagnetic tomography (sLORETA) [1], which allows to study cortical EEG sources in 6239 cortical grey matter voxels.

Materials and methods

Resting EEG was recorded in 20 mild to moderate AD patients (mean age= 75.04 years; 13 women and 7 men; MMSE 15-24) before and after 6 months and 2 years on ChEI (donepezil, rivastigmine, galantamine) treatment. Based on changes of MMSE scores after 2 years follow-up, 11 patients were classified as Non-responders (decrease of MMSE > 2) and 9 patients as Responders (decrease of MMSE < 2). The localization of the differences in activity between two groups (at baseline) and within groups (baseline vs. 6 months) was assessed by voxel-by-voxel t-tests of the sLORETA images of the log-transformed computed current density power in seven frequency bands.

Results

At baseline, Non-responders had significantly greater current densities in delta and alpha frequency band, which sLORETA localized in frontal (BA 6,8,9,32; alpha) and parieto-occipital (BA 7,17,39,40; delta) areas. After 6

months of ChEI treatment only Responders showed an increase of beta current densities, mainly in left frontal and temporal cortex.

Conclusions

Our results suggest that there is a subgroup of AD patients (probably with more pronounced central cholinergic deficiency syndrome) with better response to ChEI treatment, which can be identified by means of new quantitative EEG technique (sLORETA).

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