



Service Priorities and Programmes
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Cognitive Training Group for Outpatients with Mild Cognitive Impairment

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Introduction

In recent literature, there is a growing evidence for the provision of cognitive training in different forms as a powerful approach for promoting cognitive vitality in persons with mild cognitive impairment (MCI). The non-pharmacological training approaches to MCI including: computer training, individual cognitive stimulation and cognitive group for cognitive rehabilitation and education. Occupational Therapy outpatients with mild cognitive impairment and early dementia are rapidly increasing; the referral numbers has increased from 365 referrals in 2009 to more than 800 referrals in 2012. These patients are receiving different forms of intervention including assessment, computer cognitive training and cognitive training group.

Objectives

The objectives of this review include: examination of the characteristics of patients with MCI with regard to their perceived quality of life status and severity of cognitive problem in their daily life, and to evaluate the outcome of the cognitive training group, in order to provide information for service improvement that can tailor to the needs of the patients.

Methodology

Patients with MCI were recruited to join a cognitive training group consists of four sessions, focusing on basic knowledge on definition and presentation of MCI, strategies to improve memory, nutritional facts on brain health, importance of physical activities and relaxation for better cognition. Patients are required to fill a questionnaire relating to their memory problems in daily life and two rating forms for their perceived quality of life status (QOL-AD, WHO-5) before the group. A post group questionnaire on the evaluation on their learning will be completed after they attended the four sessions of the group.

Result

A total of 18 patients have filled in the post group questionnaires, 23 WHO-5 data forms, 39 questionnaires on cognitive problems in daily life and 22 QOL-AD data forms have been collected. Patients Quality of Life In the WHO-5 ratings, around 52 % ratings on 2 and 3 in a scale from 0 to 5, with 5 being the most positive rating and 0 the most negative rating, most patients in the medium portion of the rating scale. With

QOL-AD, over 80% of the ratings on 2 and 3 in a scale from 1 to 4, with 4 being the most positive rating and 1 is the most negative rating, most patients are also in the medium portion of the rating scale. The worst rating is in question 5 concerning the memory (31.8% for 1 and 54.5% for 2). Cognitive problems in daily life Unable to locate personal items and forget shopping list are the two most frequent problems in our patients, over 80% of the patients rate them as frequent or some times. Over 70% of the patients expressed a fair mood status due to the memory decline. More than 80% of the patients feel that memory decline is natural with ageing, 60% of the participants feel a lack of control on their memory problem. Around 50% of the participants think that memory decline is equivalent to dementia. Cognitive group feedback Over 88% of the patients have positive overall rating for the group (rating 1 and 2) and said they will recommend others to join the group. In learning the different kinds of knowledge, more participants showed better understanding in nutritional management, relaxation techniques, and regular physical activities for improving brain health. Moderate understanding on memory strategies by the participants was noted, and the application of the strategies in real life situation is perceived as the most difficult part. Almost 95% of the participants have high rating for support and sharing they can get from the group, and they feel happy with the group interaction. The data collected can enhance service improvement for patients with mild cognitive impairment.