Senior Moments: Self-report, Abnormal Cognitive Testing, and Perceptions of "Normalcy"

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INTRODUCTION

Older adults use the term "senior moment" to describe Subjective Cognitive Decline (SCD). SCD is self-reporting worse or more frequent episodes of memory loss. SCD can be a precursor of Alzheimer's disease (AD). We sought to examine older adult self-report of SCD, perceptions about SCD, and whether selfreport of SCD reflected impaired cognitive testing.

METHODS

We are conducting a longitudinal single-group interventional clinical trial of community-dwelling older adults (age 65 years and older) who are currently enrolled in the Health Literacy and Cognitive Function among Older Adults (LitCog) research study that involves extensive multipledomain cognitive testing. As part of the study, subjects the intervention, receive PlanYourlLlfespan.org (PYL), which is a free, publicly available, RCT-evidence based online tool, which facilitates long term care and agingin-place decision-making.

Cognitive testing was conducted through a detailed neuropsychological battery and grouped into 3 categories: no impairment, mild cognitive impairment (MCI), moderate dementia. We also asked subjects open-ended questions about their personal experiences with memory loss and their perceptions.

We utilized a mixed-method approach for analysis. Descriptive statistics were used for demographics and cognitive testing; openended responses about perceptions of SCD were coded by three coders using constant comparative analysis with triangulation of themes.

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"Senior Moments" are commonly experienced by older adults and describe Subjective Cognitive Decline (SCD).

Mixed method analysis revealed that older adults overwhelmingly feel that it is normal. Qualitative analysis revealed five major themes surrounding this belief.

Self-report of SCD did not correlate to abnormal cognitive testing so cognitive screening should not depend on this.

Table 2. Thematic analyses results, SCD normalcy

Theme	Example Quote
Comparison to Peers	"Just about everyone I know laugh about losing our glasses or where we park the car. It is very common among my age group."
Prior Experience with Others	" My mother died at 92 and she had dementia. When I talk to people, they assure me there is nothing going on. "
Inevitable	"Yes, all your brain cells are dying every dayIt's just a factor of age"
Consulted with a clinician	"I went to go see a doctor because I thought I was getting Alzheimer or dementia, my results showed that I didn't have it."
Denial	"It's normal because it's not like a thing where I forget extreme things. I only forget minor things."



RESULTS

Of the 293 subjects, mean age was 73, 72.7% female, and 40.4% Non-White. 40.6% had limited health literacy. The majority of Subjects had some college, completed college, or had graduate degrees.

Variable	Baseline (n=293) 73.0 (5.0)
Age, M (SD)	
Sex, n (%)	
Male	80 (27.3)
Female	213 (22.7)
Race n (%) a	
Black	85 (29.1)
White	174 (59.6)
Other	33 (11.3)
Education, n (%) b	
HS or less	43 (14.7)
Some College	54 (18.5)
College Graduate	64 (21.9)
Graduate Degree	141 (44.9)
Income, n (%) °	
< \$10,000	13 (4.6)
\$10,000-\$24,999	39 (13.9)
\$25,000-49,999	70 (24.9)
>= \$50,000	159 (56.6)
Employment Status, n (%)	
Working for Pay	83 (28.3)
Retired/Unemployed	210 (71.7)
Marital Status, n (%) d	* *
Married	138 (47.3)
Unmarried/Widowed	154 (52.7)

(47.4%, n=139) **Almost** reported **SCD**, with 42.4% experiencing (n=59) experiencing SCD weekly and 18% (n=25) reporting SCD occurring monthly.

Of those who reported SCD, 78.4%, (n=109) of subjects felt it was normal for their age.

Despite 22.2% (n=65) testing at levels of mild or moderate cognitive impairment, 46.2% (n=30) of these participants denied experiencing any SCD. Of those with normal cognitive testing (n=218), 47.8% (n=104) reported SCD events

Qualitative analysis revealed 5 major themes: as to why older adults felt it was normal (Table 2).

DISCUSSION

With over one third identifying SCD, older adults felt that it was normal and provided themes consistent with it being expected with age. Selfreport of SCD did not correlate to abnormal cognitive testing. Possible reasons could be denial or lack of insight on SCD occurrences. These findings may help providers to press for further cognitive testing regardless of a patient reporting SCD.

FINANCIAL DISCLOSURE

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