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Summary

SUBCLINICAL COGNITIVE IMPAIRMENT IN CHRONIC PANCREATITIS IS ASSOCIATED WITH REDUCED MOBILITY AND QUALITY OF LIFE

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Pancreas

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Subclinical cognitive impairment was found in 41% of chronic pancreatitis patients and was associated with reduced quality of life, impaired physical performance, and alcohol abuse as an independent risk factor.

KEY POINTS

- In 71 prospectively enrolled chronic pancreatitis patients, subclinical cognitive impairment (diagnosed by at least one pathological PHES test) was prevalent in 41%, with 25% showing one abnormal test and 16% showing two or more abnormal tests.
- Patients with subclinical cognitive impairment had significantly lower overall quality of life scores (p=0.048), impaired physical functionality (p<0.001), longer timed up-and-go test completion (p=0.008), and more frequent pathological chair rising test results (p=0.004).
- History of alcohol abuse was an independent risk factor for subclinical cognitive impairment (odds ratio 3.46, p=0.02) in multivariable analysis adjusting for age, gender, education, and cirrhosis.
- Patients with subclinical cognitive impairment had lower serum prealbumin (p=0.01), magnesium (p<0.001), and iron (p=0.02) levels.
- Sleep disturbance was the strongest variable independently associated with impaired global quality of life (odds ratio 9.9, p=0.001) in multivariable analysis.

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