

学位論文抄録

Clinical features of behavioral symptoms in patients with semantic dementia:

Does semantic dementia cause autistic traits?

(意味性認知症の行動特徴についての検討:

意味性認知症の発症は自閉症特性を生じさせるのか?)

Results

佐久田 静

The present study examined the clinical features of behavioral symptoms in patients with semantic dementia (SD). The results showed that the patients with SD had more behavioral symptoms than those with Alzheimer's disease (AD) and vascular dementia (VD). The patients with SD also had more autistic traits than those with AD and VD. The patients with SD had more social withdrawal, repetitive behaviors, and stereotyped interests than those with AD and VD. The patients with SD also had more difficulty with social interaction, communication, and executive function than those with AD and VD. The patients with SD also had more difficulty with memory, language, and visuospatial abilities than those with AD and VD. The patients with SD also had more difficulty with self-care, instrumental activities of daily living, and basic activities of daily living than those with AD and VD. The patients with SD also had more difficulty with problem solving, decision making, and planning than those with AD and VD. The patients with SD also had more difficulty with social withdrawal, repetitive behaviors, and stereotyped interests than those with AD and VD. The patients with SD also had more difficulty with social interaction, communication, and executive function than those with AD and VD. The patients with SD also had more difficulty with memory, language, and visuospatial abilities than those with AD and VD. The patients with SD also had more difficulty with self-care, instrumental activities of daily living, and basic activities of daily living than those with AD and VD. The patients with SD also had more difficulty with problem solving, decision making, and planning than those with AD and VD.

指導教員

竹林 実 教授

熊本大学大学院医学教育部博士課程医学専攻神経精神医学

Abstract of the Thesis

Background and Purpose:

Although semantic dementia (SD) and autism spectrum disorder (ASD) are etiologically distinct diseases, patients with SD behave like those with ASD. We investigated the behavioral characteristics of SD by using an instrument originally developed for patients with ASD.

Methods:

The behavioral symptoms of 20 patients with SD and 20 patients with Alzheimer's disease (AD) in both the preclinical state and the dementia state were evaluated using the Pervasive Developmental Disorders Autism Society Japan Rating Scale (PARS).

Results:

The SD group showed high prevalence in four behaviors related to stereotypy and social impairment: eating very few food items, selfishness, difficulty in recognizing others' feeling and thoughts, and interpreting language literally. Scores on the PARS short version, which is sensitive for diagnosis of autism spectrum disorder, were significantly higher in the dementia state than in the preclinical state in both the SD (11.5 ± 6.0 and 1.7 ± 2.5 , respectively; $t(19) = 6.7$, $p < 0.001$) and AD (6.9 ± 4.6 and 1.7 ± 2.0 , respectively; $t(19) = 5.1$, $p < 0.001$) groups. PARS short version scores after dementia onset increased in both the SD and AD groups, although the increase was significantly larger in the SD group ($F = 5.6$, $p = 0.023$). Additionally, a significantly higher rate of patients exceeded the cutoff score for autism diagnosis in the dementia state in the SD group (75%) than in the AD group (40%; $\chi^2 = 5.0$, $p = 0.025$). PARS scores in the dementia state were significantly correlated with illness duration ($r = 0.46$, $p = 0.04$) and Mini-Mental State Examination scores ($r = -0.75$, $p < 0.001$) in the SD group only.

Conclusions:

We demonstrated that onset of SD produces similar behaviors to those of ASD. Our findings suggest the symptomatic similarity of SD and ASD.

学位論文抄録

[目的]

意味性認知症(Semantic dementia; SD)の人格変化および行動障害の特徴を、神経発達症である自閉症スペクトラム症(Autism spectrum disorder; ASD)の評定尺度を用いて検討した。

[方法]

SD 患者 20 名と、性別と罹病期間を合わせたアルツハイマー型認知症(Alzheimer's disease; AD)患者 20 名を対象とした。主介護者に、日本自閉症協会広汎性発達障害評定尺度(PARS)の思春期・成人期版を用いて、児童精神科医が半構造化面接を行い、SD 群と AD 群それぞれの認知症発症前と発症後の ASD 特性を評価した。

[結果]

SD 群に高頻度な行動特徴として、PARS の4つの質問項目が抽出された。1つは「偏食が激しく、食べ物のレパートリーが極端に狭い」であり、残りの3つは社会性の障害を反映した「周囲に配慮せず自分中心の行動をする」「人の気持ちや意図がわからない」「冗談や皮肉がわからず、文字通り受け取る」だった。ASD 診断に感度の高い PARS 短縮版で、発症前と発症後の点数を比較したところ、SD 群(1.7 ± 2.5 , 11.5 ± 6.0 ; $t(19)=6.7$, $p<0.001$)、AD 群(1.7 ± 2.0 , 6.9 ± 4.6 ; $t(19)=5.1$, $p<0.001$)で、両群ともに発症後の点数が有意に高かった。発症前の点数で両群に差はなかったが、SD 群は AD 群に比して発症後の PARS 点数が有意に増加していた($F=5.6$, $p=0.025$)。発症前の PARS 短縮版の点数で、ASD 診断のカットオフ値を超えた患者が SD 群と AD 群で各 1 名ずつ存在した。一方、発症後に ASD 診断のカットオフ値を超えた患者は、SD 群が 15 名(75%)、AD 群が 8 名(40%)と、SD 群で有意に多かった($\chi^2=5.0$, $p<0.001$)。発症後の PARS 短縮版の点数と、罹病期間および MMSE 点数の相関を検討したところ、SD 群でのみ罹病期間と PARS 点数に正の相関、MMSE 点数と PARS 点数に負の相関が見られた。AD 群では PARS 短縮版点数と罹病期間、MMSE 点数のいずれにも有意な相関はなかった。

[考察]

SD 患者は、成人 ASD と診断可能なほど ASD に類似した行動特徴を呈していた。本研究の SD 群と AD 群で、PARS 点数で表された発症前の ASD 特性や ASD 有病率に差はなく、発症前の ASD 有病率は一般人口と同等であったことから、発症前の ASD 特性は SD 発症のリスクではないと考えられた。また SD 群でのみ、PARS 点数と罹病期間や認知症の重症度と相関があり、これは SD が進行するほど ASD 特性が増強することを示している。すなわち SD における ASD 類似の行動特徴は、元からあったものではなく、後天的な神経変性により生じており、さらに SD の神経変性が進行するほど ASD 特性が増強することが本研究により示された。SD は側頭葉に神経変性の主座があり、ASD は側頭葉における神経ネットワークの異常が報告されている。両疾患に共通する症状は側頭葉の機能異常に起因している可能性がある。本研究は初老期に発症する神経変性疾患の SD と、先天性の神経発達症である ASD の症候学的共通点や共通する神経基盤について論じた初めての研究である。

[結論]

SD の行動特徴は ASD に類似しており、両者には症候学的な共通点がある。