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EXPERIMENTAL PAIN IN DEMENTIA

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Two study lines will be presented. One is focussing on the changes in experimental pain responsiveness in patients with dementia compared to healthy elderly and individuals with MCI. Patients with dementia appeared as more pain responsive (lower RIII-reflex thresholds, more pain-related facial responses, no difference in ratings) whereas the results of the MCI group were indistinguishable from those of the health elderly. Only the sympathetic skin response was similarly smaller in patients with dementia and the MCI individuals. The clinical reports of less frequent pain and less requirements of analgesics in dementia were not corroborated by the present experimental data. In the second study line, neuropsychological correlates of experimental pain sensitivity (rating, RIII-reflex, facial responses) were investigated in patients with MCI and dementia. The scores of a screening battery for dementia (SIDAM) and a modified version of the TMT-A were used. Significant correlations were found but only for the R-III threshold. Especially the scale for executive functions helped to explain the R-III reflex thresholds, suggesting frontal contributions to changes in pain processing in dementia. Depression, who often impacts pain processing, did not mediate the relationship between experimental pain and neuropsychology.