Cognitive Impairment in Primary Sjögren’s Syndrome

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Background: Several small studies have investigated cognitive impairment in primary SS (PSS) using self-reported measures. We sought to quantify cognitive impairment symptoms in a large cohort of 150 PSS patients compared with controls and to explore the relationship between cognitive impairment with fatigue, pain and mood symptoms.

Methods: PSS patients diagnosed according to the American European Consensus Criteria were recruited from 12 sites across the UK. They were invited to complete the Cognitive Failures Questionnaire (CFQ) as well as measures of mood (Hospital Anxiety and Depression Scale), fatigue (visual analogue scale (VAS)), dryness (VAS) and pain (VAS). CFQ scores were compared with data from controls. Completion of the CFQ yields a possible score between 0 and 100, with 0 demonstrating no cognitive symptoms.

Results: 150 PSS patients and 198 controls completed the CFQ. An independent samples t-test revealed a statistically significant (P < 0.001) increase in cognitive symptom burden in the patient group [mean score 43.7 (S.D. 17.8)] compared with controls [mean score 35.9 (S.D. 12.9)]. This difference persisted (P < 0.001) following analysis of covariance adjusting for age and gender. On average PSS patients scored 8 points higher than controls on the CFQ. This is comparable to data in other fatigued patient groups. There were significant correlations with pain, fatigue, anxiety, depression and subjective dryness scores with CFQ scores. In order to partition the variability in CFQ scores into its component parts, we performed a multiple regression analysis. This confirmed that anxiety was the most important predictor of CFQ scores (P = 0.004).

Conclusion: Cognitive impairment is more common in PSS than the general population and people with PSS are likely on average to score 8 points higher on the CFQ. Anxiety is a predictor for cognitive failure in PSS. This work suggests that clinicians need to give consideration to cognitive failure and anxiety in the management of PSS patients.

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