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GENERAL CLINICAL AND NEUROPSYCHOLOGICAL ASSESSMENT OF COGNITIVE FUNCTION IN MYASTHENIC PATIENTS

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ANNOTATION

Objective: To investigate and correctly assess cognitive functions in patients with myasthenia gravis on the basis of a comprehensive clinical-neuropsychological and laboratory examination.

Methods: comprehensive clinical-neurological, neuropsychological and laboratory examination of 95 patients with myasthenia gravis who received inpatient treatment at the neurological departments of Bukhara Regional Multidisciplinary Hospital from 2020 to 2022, as well as 40 control group persons.

Results: were compared taking into account the clinical form of myasthenia gravis, presence of thymoma, and concomitant somatic diseases; comparative statistical analysis was carried out.

Conclusions. Our results confirm that in patients with myasthenia gravis neurotrophic factor has lower blood serum values than the control group.

Keywords: myasthenia gravis, cognitive changes, neuropsychological evaluation

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ОБЩАЯ КЛИНИКО-НЕЙРОПСИХОЛОГИЧЕСКАЯ ОЦЕНКА КОГНИТИВНЫХ ФУНКЦИЙ У БОЛЬНЫХ МИАСТЕНИЕЙ

АННОТАЦИЯ

Цель: Исследовать и правильно оценить когнитивные функции у больных миастенией на основании комплексного клинико-нейропсихологического и лабораторного исследования.

Методы: комплексное клиническое-неврологическое, нейропсихологическое и лабораторное обследование 95 пациентов с миастенией, получавших стационарное лечение на

базе неврологических отделений больницы областной многопрофильном центре Бухарской области с 2020 по 2022 год, а также 40 лиц контрольной группы.

Полученные результаты: были сопоставлены с учетом клинической формы миастении, наличия тимомы и сопутствующих соматических заболеваний с выполнением сравнительного статистического анализа

Выводы. Наши результаты подтверждают выявлено, что у больных миастенией мозговой нейротрофический фактор имеет более низкие значения в сыворотке крови в сравнении с контрольной группой.

Ключевые слова: миастения, когнитивные изменения, нейропсихологическая оценка

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МИАСТЕНИЯГА ЧАЛИНГАН БЕМОРЛАРДА КОГНИТИВ ФАОЛИЯТИНИ УМУМИЙ КЛИНИК ВА НЕЙРОПСИХОЛОГИК БАҲОЛАШ

АННОТАЦИЯ

Мақсад: миастенияга чалинган беморларда когнитив функцияларни комплекс клиник-нейропсихологик ва лаборатория текшируви асосида ўрганиш ва тўғри баҳолаш.

Материал ва методлар: Бухоро вилоят кўп тармоқли шифохонасининг неврологик бўлимларида стационар даволанган миастения билан касалланган 95 беморни 2020 йилдан 2022 йилгача, шунингдек 40 нафар назорат гуруҳини комплекс клиник-неврологик, нейропсихологик ва лаборатория текшируви орқали текширилди.

Натижалар: миастения касаллигининг клиник шакли, тимома мавжудлиги ва биргаликда соматик касалликларни ҳисобга олган ҳолда таққосланди; қиёсий статистик таҳлиллар ўтказилди.

Хулоса: Бизнинг натижаларимиз шуни тасдиқладики, миастения касаллиги нейротрофик омили бўлган беморларда қон зардобиди назорат гуруҳига нисбатан паст кўрсаткичларнинг мавжудлиги.

Калит сўзлар: миастения, когнитив ўзгаришлар, нейропсихологик баҳолаш

Introduction. Myasthenia gravis is a chronic autoimmune neurological disease caused by the production of specific antibodies to different regions of the neuromuscular synapse (1,3). Myasthenia can debut at any age in life, but in most cases the first clinical manifestations occur in young and middle-aged patients (4). The cost per patient with myasthenia gravis is about \$25,000 per year in the US. Medication costs per patient are \$9.4 million per year, most of which is spent on intravenous immunoglobulins (5). Myasthenia gravis can have a progressive course, leading to disability and a significant reduction in quality of life [7,9] Myasthenia gravis was previously considered a relatively rare condition, but in the last fifty years, with the introduction of modern diagnostic methods and an increase in life expectancy, there has been an increase in the proportion of patients in all age groups [8]. The global prevalence of myasthenia gravis ranges from 2 to 32 per 100,000

The evaluation of cognitive processes in myasthenia gravis patients has been extensively discussed in the international literature over the past 20 years. Previous studies have found a high prevalence of subjective complaints of reduced attention, memory impairment and other cognitive functions [1,10], and a high prevalence of attention disorders (37.5%), verbal memory (33.3%) and frontal functions (29.2%) among myasthenic patients has been confirmed.

Currently, there is no consensus on the pathogenesis of cognitive impairment in myasthenia gravis. Most authors consider dysfunction of the basal cholinergic system, which develops as a result of cross-interaction of antibodies to acetylcholine receptors (ACRs) with cholinergic neurons of different brain regions, to be the main cause of cognitive impairment [11]. At the same time, a number

of authors hold the opinion that antibodies to acetylcholine receptors are not able to penetrate through the blood-brain barrier in sufficient quantities and have a significant negative effect on the cognitive sphere [2,13]. Thus, there are currently no clear ideas about the pathogenesis, nature and severity of cognitive disorders in patients with myasthenia gravis. At the same time, a number of authors are of the opinion that antibodies to acetylcholine receptors cannot cross the blood-brain barrier in sufficient quantities to have a significant adverse effect on the cognitive sphere [4,15]. Thus, there are currently no clear ideas about the pathogenesis, nature and degree of cognitive impairment in patients with myasthenia gravis. This determines the relevance of studying the cognitive sphere in order to optimize myasthenia gravis treatment.

Cognitive impairment in myasthenic patients has been noted by many scientists, but data on frequency and severity are inconsistent and have been interpreted differently. Mild to moderate cognitive impairment is not always correctly diagnosed and may go undetected using insufficiently sensitive neuropsychological techniques.

The study of brain-derived neurotrophic factor concentrations in various diseases accompanied by cognitive dysfunction is of current interest. Previous studies suggest that decreased production of brain-derived neurotrophic factor is an important link in the pathogenesis of cognitive disorders in Alzheimer's disease, Huntington's disease, depression, and cerebrovascular diseases. However, studies comparing neuropsychological findings in myasthenia gravis patients with neurotrophin levels are lacking in the available literature.

Objective: To evaluate cognitive functions in myasthenic patients on the basis of a comprehensive clinical, neuropsychological and laboratory examination.

Materials and methods: We conducted a comprehensive clinical-neurological, neuropsychological and laboratory examination of 95 patients with myasthenia gravis who received inpatient treatment at the neurological departments of Bukhara Regional Multi-Disciplinary Hospital from 2020 to 2022, and 40 control subjects. The results were compared taking into account clinical form of myasthenia gravis, presence of thymoma and concomitant somatic diseases and comparative statistical analysis.

Results of the study: We found neuropsychological features in patients with myasthenia gravis compared with the results of clinical and laboratory methods of examination testify to the negative influence of the long-lasting autoimmune process on cognitive functions, as well as myasthenia gravis patients with thymoma have an increased risk of cognitive disorders compared with patients without thymic tumours. The study group included 93 patients with myasthenia gravis aged 18-69 years (mean age 48.4 ± 15.4 years). Patients with a history of decompensated neurological or somatic diseases accompanied by cognitive impairment, patients with acute stroke, myocardial infarction, severe craniocerebral trauma, and patients taking medications that adversely affect cognitive function were excluded from the study group.

The control group comprised 46 volunteers aged 24 to 69 years (mean age 47.2 ± 13.5 years), who underwent comprehensive medical examination and had no known severe somatic, neurological, or mental diseases and no complaints of memory or attention disorders. No statistically significant differences in gender and age were found between the examined groups ($p > 0.05$).

The results of neuropsychological testing were compared with the level of brain-derived neurotrophic factor in the serum of myasthenic patients. The data obtained in the investigation allowed to specify pathogenetic features of development of intellectual and mental disorders in myasthenia gravis. A negative correlation between the level of antibodies to acetylcholine receptors in blood serum and severity of frontal dysfunction in myasthenic patients was determined. The severity of anxiety in patients with myasthenia gravis was studied, its relationship with the indices of neuropsychological methods of examination was analyzed. The high frequency of cognitive disorders in myasthenic patients was found to correlate with the severity and duration of the disease.

Myasthenia gravis patients with thymoma before thymectomy were found to have more pronounced cognitive impairment compared to patients after thymectomy.

Conclusions: Thus, brain-derived neurotrophic factor was found to have lower serum values in myasthenia gravis patients compared to controls. The levels of brain-derived neurotrophic factor

correlate with the severity of cognitive impairment, the form of myasthenia gravis and the duration of the disease.

The use of a comprehensive neuropsychological examination is necessary for differential diagnosis and identification of comorbid cognitive and anxiety disorders, which should help to optimise therapy and improve quality of life in myasthenic patients.

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