Mild cognitive impairment (MCI)

Mild cognitive impairment (MCI) is a condition in which an individual has mild but measurable changes in thinking abilities that are noticeable to the person affected and to family members and friends but that do not affect the individual’s ability to carry out everyday activities. A person with MCI experiences memory problems greater than normally expected with aging but does not show other symptoms of dementia, such as impaired judgment or reasoning.

People with MCI, especially MCI involving memory problems, are more likely to develop Alzheimer’s disease or other dementias than people without MCI. However, MCI does not always lead to dementia. In some individuals, MCI reverts to normal cognition or remains stable. In other cases, such as when a medication causes cognitive impairment, MCI is mistakenly diagnosed. Therefore, it’s important that people experiencing cognitive impairment seek help as soon as possible for diagnosis and possible treatment.

In 2011, the National Institute on Aging (NIA) and the Alzheimer’s Association® published revised criteria and guidelines for the diagnosis of Alzheimer’s disease, suggesting that in some cases MCI is an early stage of Alzheimer’s or another dementia. The 2011 criteria and guidelines recommend finding a biomarker (a measurable biological factor, such as levels of a protein, that indicates the presence or absence of a disease) for people with MCI to learn whether they have brain changes that put them at high risk of developing Alzheimer’s disease and other dementias. If it can be shown that changes in the brain, cerebrospinal fluid and/or blood are caused by physiologic processes associated with Alzheimer’s, the 2011 criteria and guidelines recommend a diagnosis of MCI due to Alzheimer’s disease.

More research is needed on the biological changes associated with normal aging, MCI, and Alzheimer’s disease and other dementias to better understand the causes of and risk factors for MCI, as well as the prognosis for those with MCI.