

Cognitive training in MCI and SCI: Impact on cognition, strategy use and virtual reality measures of real-life cognition

Sylvie Belleville, PhD

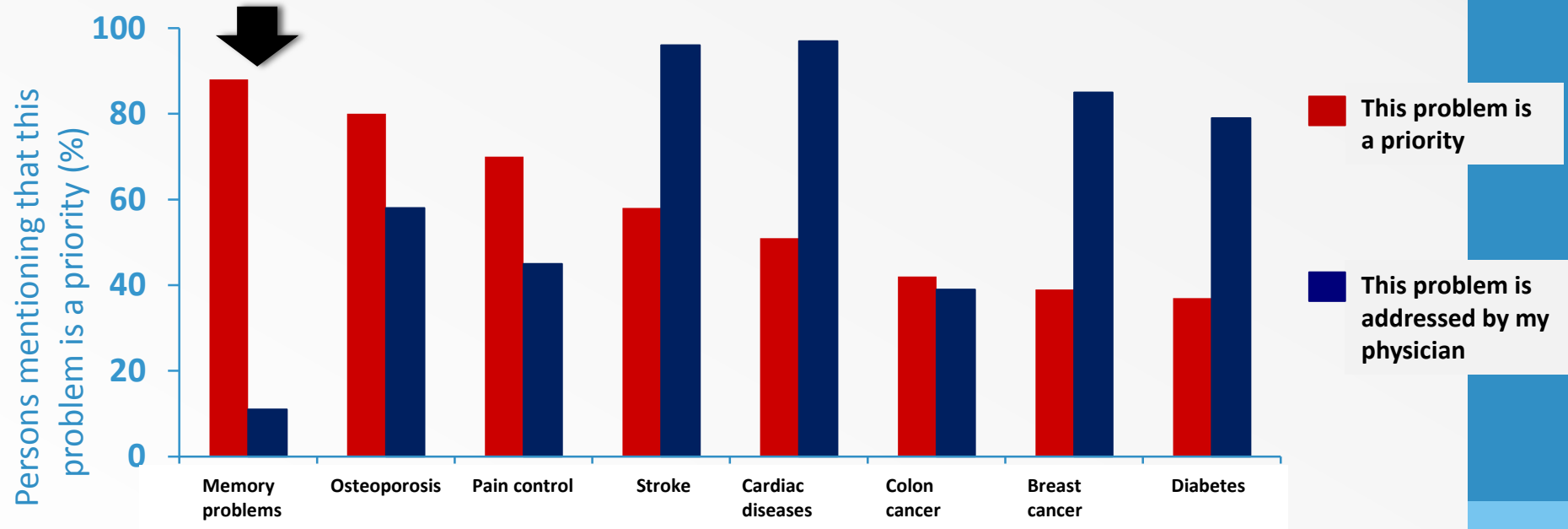
Canada Research Chair in Cognitive Neuroscience of Aging and Brain plasticity

Professor, Dept. Psychology, Université de Montréal

Scientific director, Research Center, Institut universitaire de gériatrie de Montréal

Director, Consortium for the early Identification of Alzheimer's disease-Québec (CIMA-Q)

Memory is the top health priority for older adults and the one least addressed!



Older women's health priorities and perceptions of care delivery: results of the WOW health survey

Cara Tannenbaum, Nancy Mayo, Francine Ducharme

N= 2161 older
canadian women

Can I do something to
protect my brain from the
effects of the disease?

There are things that you can do

- Be physically active
- Keep a well balanced healthy diet
- Stop smoking
- Control vascular risk factors (hypertension, diabetes, obesity)
- Sleep well
- Keep your brain active

There are things that you can do

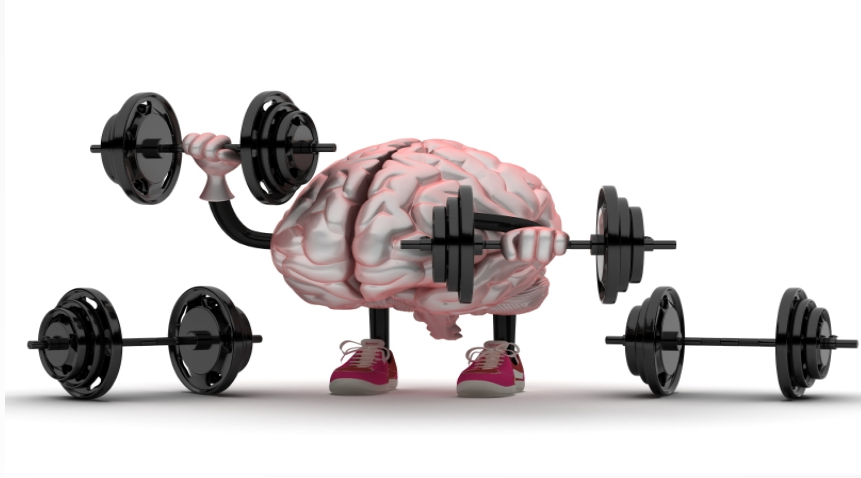
- Be physically active
- Keep a well balanced healthy diet
- Stop smoking
- Control vascular risk factors (hypertension, diabetes, obesity)
- Sleep well

 **Be cognitively active**

Participating in cognitively stimulating activities reduces by **60%** the risk of developing Alzheimer's disease



- Early life education
- Cognitively stimulating jobs
- Cognitively stimulating leisure activities
 - E.g.: cross-words puzzles, camera club, strategy games, museum, debates, learning another language or learning music...



A stimulating
lifestyle allows
you to build
your ***cognitive
reserve***

How does this protect the brain?



COGNITIVELY STIMULATING ACTIVITIES across the lifespan



RESISTANCE

Less pathologies in the brain



RESILIENCE

Pathologies are present but their effects are compensated by more efficient or active brain networks

COGNITIVE RESERVE



Better cognition

Can we build our cognitive reserve at an older age with cognitive training?



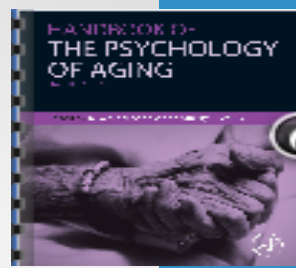


💡 Cognitive training might also help daily life by providing strategies that one can use to better perform cognitively demanding activities.

Different types of training

(Willis et Belleville, 2016)

- **Therapist-based strategy training** : teaching of new/more efficient ways to complete tasks (e.g.: ACTIVE, MÉMO)
- **Computerized training**: **Serious videogames** experimental (e.g.: Neuropeak; priority training) OR **commercial platforms** (e.g.: Brain HQ, Happy Neuron), **casual videogames** (e.g. Super Mario 64; Crazy taxi)
- **Community-based activities** : **Volunteering** or **intergenerational activities** (e.g.: Experience corps), **new cognitively stimulating leisures** – music, second language, digital photography (e.g.: Synapse; Engage)



The MEMO program



Programme d'intervention
cognitive pour les aînés
MEMO



Focus on **memory** : main complaint.



Provides a **tool-box** of **memory strategies**



Includes **multi-tasking training** to improve memory in real-life distracting conditions.



Therapist-based small group (4-5 persons)



Designed to promote **self-confidence**



Exercices to practice **use of strategy in everyday life**

Pay attention

Focus your attention:

slow down, stop, be aware of the present

(stop and find a cue to where I parked the car)

Reduce « irrelevant noise » or visual distractors

(television, radio)

Try to reduce multitasking

if you have to, focus on the most important task

Take pauses when doing demanding tasks

Encode with depth

Relate to things you already know

(the first time I came to Miami!)

Group items

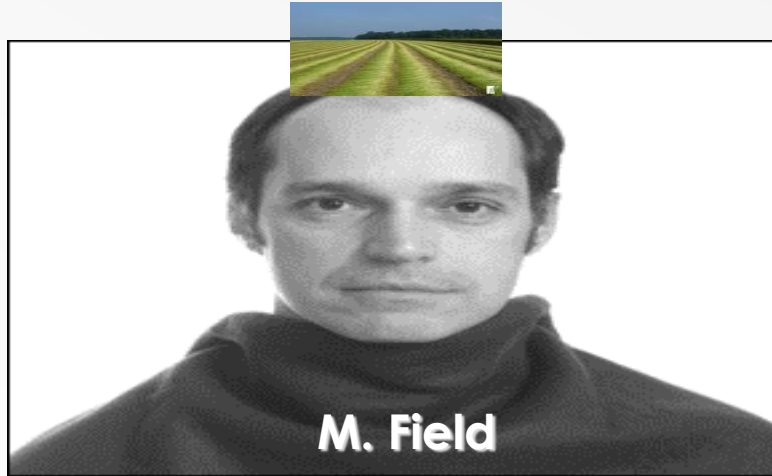
organize them in meaningful units

Use dual coding

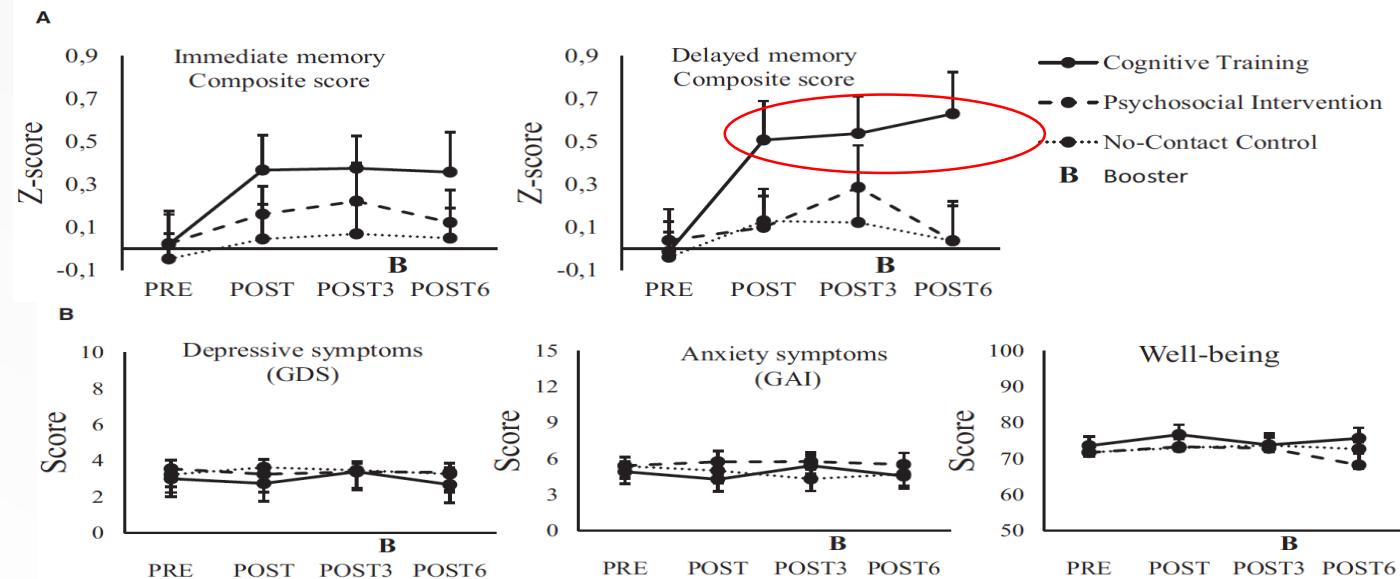
Visualize, speak out loud instructions in your own words

Make funny associations

Learn, practice and use memory strategies



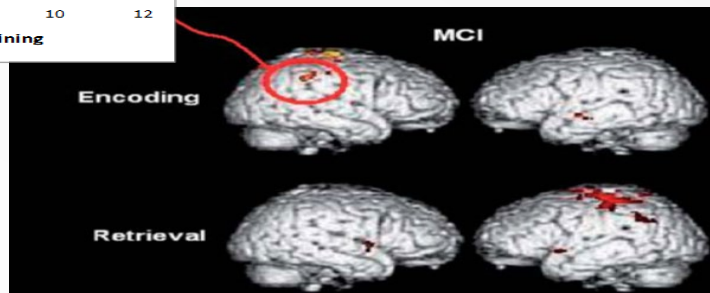
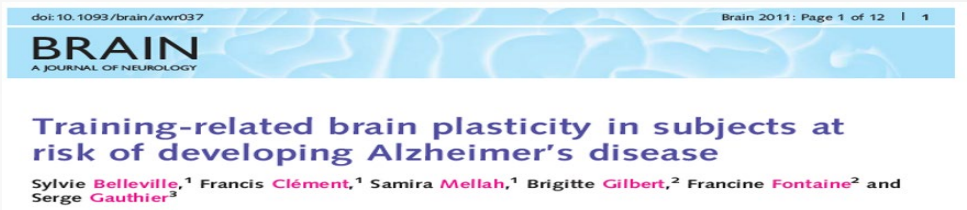
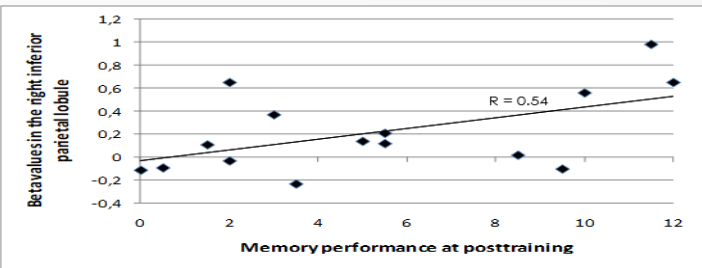
Efficacy, durability and specificity



Modified ITT analyses; Mixed linear model adjusted for sex, educations and age;
Group x Time interaction; $P < 0.01$, for delayed memory composite

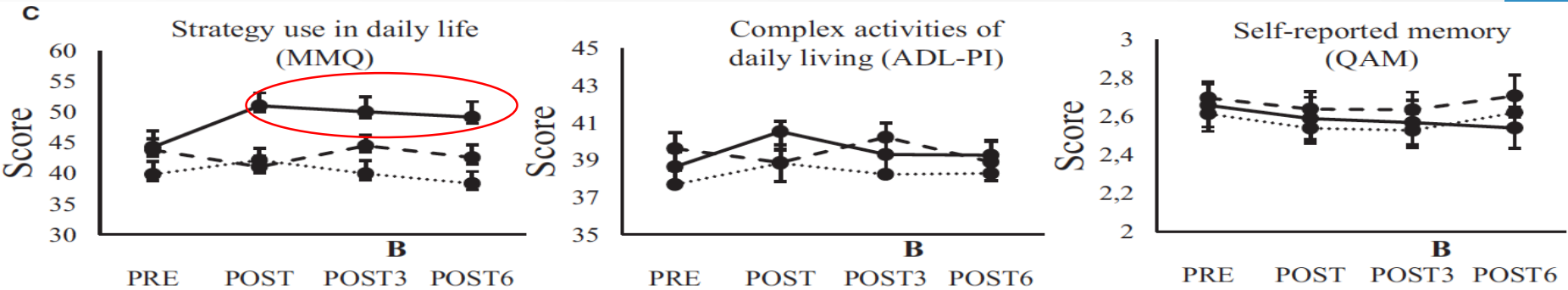
Mean Age: 72.3 ans; Mean Education: 14.6 years of age; 53.4% women

Increased brain activation in regions related to the learned strategies



Post-Pre activation

Effect on transfer ? they more often use strategies ... but do not show improvement on on self-reported complex activities

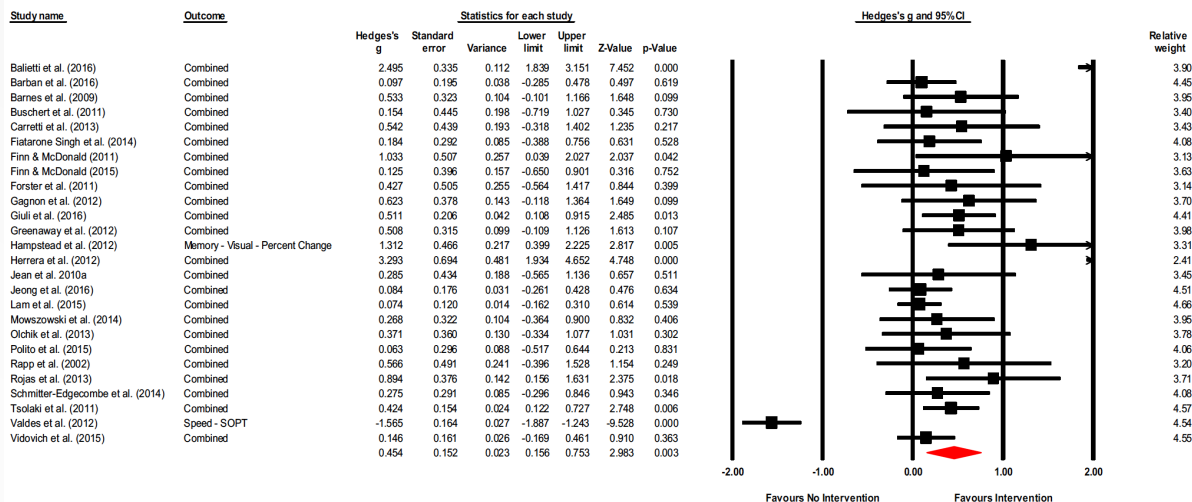


Modified ITT analysis with mixed linear model adjusted for sex, age and education; Group x Time interaction; $P < 0.01$ for strategy use (MMQ)

Strategy based cognitive training improves cognition in persons with MCI and the effect is durable

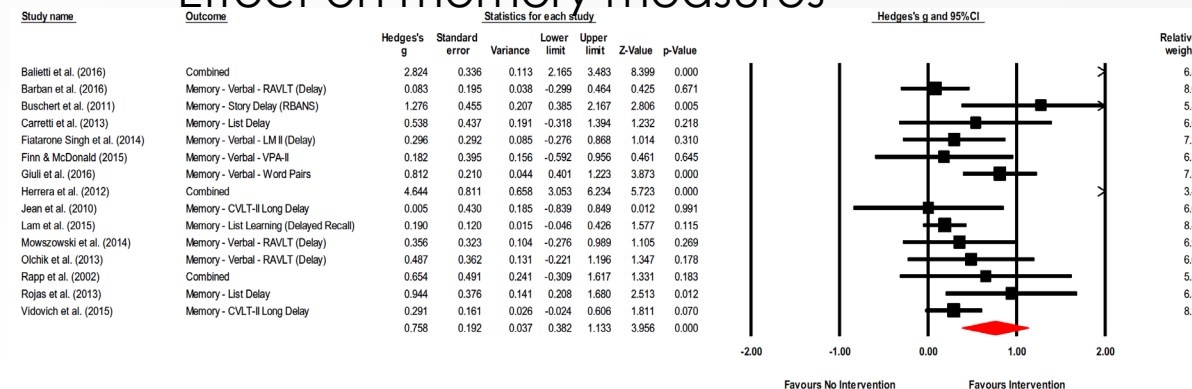


Effect on all outcome measures



Other types of interventions have encouraging results as well

Effect on memory measures



Neuropsychol Rev (2017) 27:440–484
<https://doi.org/10.1007/s11065-017-9363-3>

REVIEW

The Efficacy of Cognitive Intervention in Mild Cognitive Impairment (MCI): a Meta-Analysis of Outcomes on Neuropsychological Measures

Dale S. Sherman^{1,2} · Justin Mauser³ · Miriam Nuno⁴ · Dean Sherzai⁵

Virtual reality

Can be used to design a **diversity of multisensorial environments and scenarios**



Corriveau-Lecavalier, Ouellet & Belleville, 2017; Ouellet, Boller, Corriveau-Lecavalier, Cloutier & Belleville, 2018; Bier & Belleville, 2017, Boujut & Belleville

Real and virtual appartement

How to choose your healthy brain program?

Is this program validated with empirical finding? What are the claims? What are my goals? Are they realistic?

Do I like this type of activities or format?

Do not forget other components: physical activities, vascular risk factors, healthy diet

Triple activity scores

(triple word scores in SCRABBLE)

Activities that stimulate more than one
domain

(cognition, physical activities, social network, healthy
diet)

Tai Chi; Learning tango; Classes to learn new healthy recipes;
Volunteering.

Thank you for your attention and take care of your brain health

Students/post-doc

Bianca Bier

Arnaud Boujut

Émilie Ouellet

Nick Corriveau-Lecavalier

Simon Cloutier

Lab managers

Marc Cuesta

Samira Mellah

Aline Moussard

Marie-Claude Veilleux

Researchers/clinicians

Serge Gauthier

Benjamin Boller

Stéphane Bouchard and *in-virtuo*

Carol Hudon

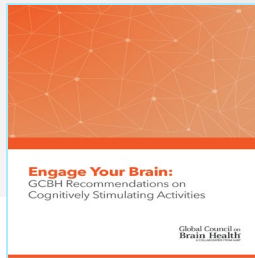
Brigitte Gilbert

Chantal Vicoglioni

Catherine Brodeur

Sébastien Grenier

Marie-Christine Ouellet



Sylvie.belleville@umontreal.ca



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