



# Mild Cognitive Impairment Treatments

The research for Mild Cognitive Impairment (MCI) is relatively new, and so the purpose of this information is to summarize trends that are being looked at in research. This list is not exhaustive, but based on information that can impact speech therapy time.

See further details about References, research summary, and treatment candidacy within the [Activity Studio](#). While this list is not all-inclusive, there are efforts made to include treatments that are current and can be integrated with personally-relevant goals.

## Cognitive Reserve principles

- Understanding how “what you’ve done” and “What you’re doing” can influence performance. See education “What is Cognitive Reserve?”

Stern, Y. (2013). Cognitive reserve in ageing and alzheimer’s disease. *Lancet Neurol.*, 11(11), 1006-1012.

## External Memory Strategies and Communication Supports

- External supports should directly relate to everyday function

Lanzi, A., & Bourgeois, M. (2019) Structured external memory aid treatment for mild cognitive impairment. *American Journal of Speech-Language Pathology*, 1-11.

## (Not) Computer Training

- Computer training has not shown evidence of transferring to everyday life skills and situations, although scores on the trained computer program may improve.

Mueller, K. (2016). A review of computer-based cognitive training for individuals with mild cognitive impairment and alzheimer’s disease. *Perspectives of the ASHA Special Interests Group*, 1(2), 47-61.

## Holistic Memory Education

- Current trends recommend educating about healthy brain behaviors that have also been shown to improve memory function. Ex: Physical activity, social connection, diet, etc.

Rogalski, Y., & Quintana, M. (2013). Activity engagement in cognitive aging: A review of the evidence. *Perspectives on Neurophysiology and Neurogenic Speech and Language Disorders*, 23, 1-12.

## Internal Memory Strategies

Alves, J., et al. (2013). Non-pharmacological cognitive intervention for aging and dementia: current perspectives. *World Journal of Clinical Cases*, 1(8), 233-241.

## Memory Confidence / Quality of Life

- Those with MCI have indicated that QOL and confidence are important to them - so there is a need to pull these measures into assessment and goal-writing.

Smith, G. E., Chandler, M., Fields, J. A., Aakre, J., & Locke, D. E. (2018). A survey of patient and partner outcome and treatment preferences in mild cognitive impairment. *Journal of Alzheimer's Disease*, 63(4), 1459–1468.

## Spaced Retrieval

- For those with memory challenges (acquired or neurodegenerative)

Han, J. W., Son, K. L., Byun, H. J., et al., (2017). Efficacy of the ubiquitous spaced retrieval-based memory advancement and rehabilitation training (USMART) program among patients with mild cognitive impairment: a randomized controlled crossover trial. *Alzheimer's research & therapy*, 9(1), 39.

## Treatment must relate to everyday life

- Research has shown limited carryover with drill-based out-of-context therapy. In order for gains to affect daily life, therapy must target those daily life needs.

Stott, J., & Spector, A. (2011). A review of the effectiveness of memory interventions in mild cognitive impairment (MCI). *International Psychogeriatrics*, 23(4), 526-538.

## Word-Finding Strategies and Aging

- Apply word-finding strategies before, during, or after the situation

Rohrer, J. D., Knight, W. D., Warren, J. E., Fox, N. C., Rossor, M. N., & Warren, J. D. (2008). Word-finding difficulty: a clinical analysis of the progressive aphasias. *Brain*, 131(1), 8-38.