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## A Mental Test Before Surgery

Cognitive evaluation can help doctors anticipate potential postoperative risks



Dr. Carla Perissinotto is an associate professor in the division of geriatrics at the University of California, San Francisco, which performs a cognitive assessment of all heart-failure patients as part of a formal evaluation before surgery. PHOTO: DANIEL DENT/UCSF



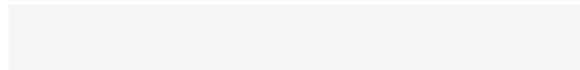
By **LAURA LANDRO**  
Nov. 28, 2016 11:59 a.m. ET

**2 COMMENTS**

More hospitals are testing the mental fitness of older patients before surgery amid evidence that the trauma of an operation can accelerate cognitive decline.

Evaluating patients for memory and thinking problems can help doctors anticipate how patients will tolerate the surgery and follow care instructions once they get home. A cognitive assessment also can assist patients' families and caregivers in deciding whether to proceed with a surgery by giving them more information about the potential risks.

Studies show as many as 81% of patients who meet the criteria for dementia have never had a formal diagnosis, and families may overlook symptoms as just natural age-related memory loss. Patients with dementia are at higher risk for a complication known as postoperative delirium, and are more likely to have worse surgical outcomes, longer hospital stays, functional declines and death.



Without a formal cognitive assessment, "we are consenting all these people for major operations they may not understand, and they may not be able to deal with what happens afterwards," says Dr. Stephanie Rogers, a geriatrician at University of California, San Francisco. UCSF, which began in 2014 to do cognitive testing on all patients in its heart-failure clinic, hasn't gone ahead with some surgeries after patients were found to have significant cognitive decline.



Dr. Stephanie Rogers, an assistant professor in the division of geriatrics at UCSF, says that without a formal cognitive assessment, "we are consenting all these people for major operations they may not understand, and they may not be able to deal with what happens afterwards." PHOTO: JULIE CARPENTER

The American College of Surgeons and the American Geriatrics Society recommend that hospitals assess any patient over 65 for cognitive impairment as part of a preoperative evaluation. Stress, inflammation, pain, medications and anesthesia that often accompany surgery are especially tough on older patients.

Angel Guerrero, 78, had surgery at UCSF in 2013 to manage his heart failure, which makes the heart muscle unable to pump enough blood to meet the body's needs. His family had previously noticed some subtle hints of memory loss—he would often forget where he left his keys and repeat questions. But they didn't think anything of it because Mr. Guerrero still drove, shopped online and booked his own flights, says his daughter, Georgina Fox. During pre-operative discussions about risks and benefits, Mr. Guerrero's memory issues weren't evident, the family didn't bring them up, and he didn't

receive a formal cognitive assessment.

Mr. Guerrero's doctors surgically implanted a mechanical pump known as a left ventricular assist device, or LVAD, which helps a weakened heart pump blood. The device is powered by a battery attached to a tube brought outside the body that has to be regularly recharged. The site also needs to be kept clean to prevent infection.



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Georgina Fox with her father, Angel Guerrero, who had surgery at UCSF in 2013 to manage his heart failure. Problems during his recovery prompted the hospital to begin doing a formal cognitive assessment of all heart-failure patients before surgery. PHOTO: GEORGINA FOX

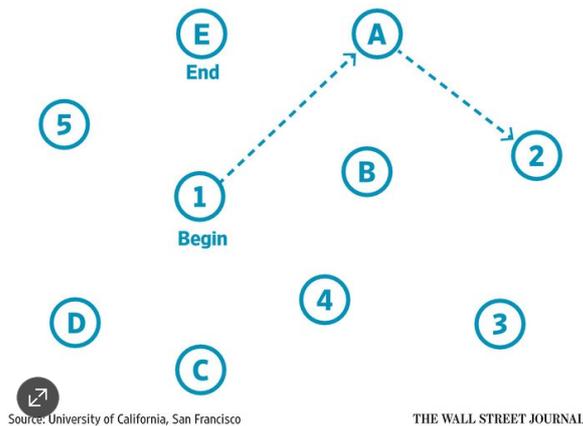
Mr. Guerrero moved in with his former wife after the surgery because he needed round-the-clock care. Ms. Fox says her father wasn't himself, sleeping excessively and getting angry and frustrated. He became obsessed with trying to escape the house and walk to the airport to return to his native Mexico. He tried multiple times to pull out his heart-pump driveline and disconnect the batteries.

Ms. Fox brought him back to UCSF, where neuropsychiatric testing, including a CT scan, showed he had longstanding dementia and a past stroke. An adult protective services program helped find him an assisted-living facility and UCSF nurses and his doctors monitor his health. He isn't strong enough for another surgery, "so we just have to pray this one is going to last," Ms. Fox says.

UCSF says the experience with Mr. Guerrero led the hospital to adopt its policy of including a cognitive assessment in heart-failure patients as part of a formal evaluation before surgery. Patients are screened using a 30-question test known as the [Montreal Cognitive Assessment](#). It includes questions to measure attention and concentration, and tests certain skills such as copying a drawing accurately and naming pictured animals. If a patient scores 21 or lower of a possible 30, more extensive testing is done.

## Testing Mental Fitness

Part of a commonly used cognitive-assessment test asks patients to draw a line going from a number to a letter in ascending order.



Source: University of California, San Francisco

THE WALL STREET JOURNAL.

In the first year of screening, UCSF doctors, along with family members, decided not to implant heart-failure devices in three patients who were found to have previously undetected cases of considerable cognitive impairment. The test results indicated the patients wouldn't be able to properly care for and use the device, according to a report the medical team published in 2015 in the journal [JAMA Internal Medicine](#).

"As the population ages, many more family members are going to be called upon to make decisions for older adults with impaired cognition due to Alzheimer's disease, dementia and other related disorders," says Alexandra Torke, an expert in surrogate decision making at the Indiana University Center for Aging Research and the Regenstrief Institute.

Dr. Carla Perissinotto, a geriatrician at UCSF who co-authored the report on cognitive assessment with Dr. Rogers, says she often has to work with family members in making difficult decisions. "For example, does a family member go forward with cancer treatment for their parent with dementia when every time we talk about cancer they are traumatized because they forgot they have it?"

**Write to** Laura Landro at [laura.landro@wsj.com](mailto:laura.landro@wsj.com)

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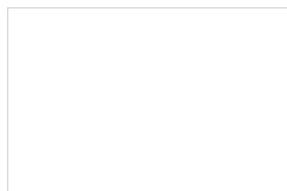
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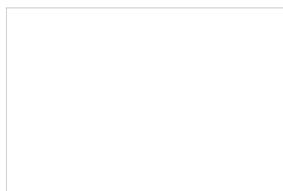
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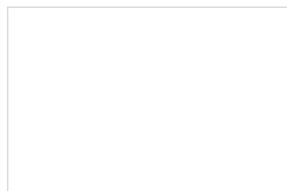
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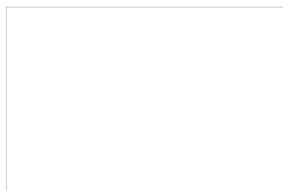


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