Matters arising

Dementia and door-to-door studies in Spain

Coria et al. have recently published a very original and interesting paper on prevalence of dementia in a rural population in Spain (Turganeo). The authors claim that this is the first door-to-door survey performed in a definite community in Spain. This statement could lead to some misunderstanding because, in fact, there are more data on prevalence of dementia in Spain obtained from door-to-door surveys. In the past five years, several door-to-door surveys on prevalence of dementia have been performed in Spain. The first reported in English was carried out by Lopez-Pousa et al. in a random sample of eight towns in Gerona in 1991. The second described in English is the Zaragoza-Liverpool study (a study based on a random sample of old people in an urban city). Another door-to-door survey reported in May 1993 in English was carried out by Bermejo et al. as a random sample of old people from four districts of Madrid. The preliminary data of these three studies have been reported previously in Spanish. More studies have been carried out (Toledo; Pamplona; Baix de Camp, Tarragona) but as yet these studies are unpublished, apart from some preliminary data.

It is noteworthy that all published studies have been performed with standardised neuropsychological protocols (CAMDEX, GMS), and international diagnostic criteria (DSM-III or DSM-III-R) and all these studies are door-to-door surveys. The most outstanding fact is that the data of prevalence of dementia (people over 60 or 65 years) are quite different and range between 1.4%-2.0% in Gerona to 5.2% in Turganeo (10% in Madrid, 6.7% in Zaragoza). 1 It is likely that there is a uniform finding: Alzheimer's disease is the most frequent cause of dementia in these Spanish surveys, as it is in others done in Western countries.

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Coria replies:

Many different groups in Spain are conducting epidemiological studies on dementia, as claimed by Bermejo et al. above. Nevertheless, ours is still the first to address the prevalence of age-associated memory impairment, using validated instruments. The only available definitive data on the prevalence of dementia in Spain were included in the EURODEM study, and the results of this study were referenced (see ref. 19 in ref. 1). The high prevalence of dementia found in one study is probably caused by the inclusion of cases with mild dementia and age-associated memory impairment. Subtraction of these cases gives prevalence rates of overt dementia similar to those found in Spain (Lopez-Pousa, personal communication).

In any case, analysis and meta-analysis of the extensive data on the subject now available in Spain would provide a good opportunity to address several controversial issues related to the methodological problems associated with epidemiological studies on dementia and other related disorders. In addition, these studies should provide large numbers of well studied cases for molecular and genetic analysis of the early stages of Alzheimer's disease.

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