

# Apathy Inventory

## How to score the Apathy Inventory Clinician version

- Lack of initiative
- Lack of interest
- Emotional blunting

# Apathy Inventory

<b>Emotional Blunting:</b>	<b>Score / 4</b>
<p>Does the patient show affection? Does she/he show emotions?</p> <p>0: <i>No problem</i> 1 - 2: <i>Moderate</i> 3 - 4: <i>Major</i></p>	
<p><b>Lack of initiative:</b> Does the patient engage in spontaneous conversation? Does she/he make decisions?</p> <p>0: <i>No problem</i> 1 - 2: <i>Moderate</i> 3 - 4: <i>Major</i></p>	
<p><b>Lack of Interest:</b> Does the patient have interests? Is she/he interested in the activities or projects of others? Does she/he show interest in friends and family members?</p> <p>0: <i>No problem</i> 1 - 2: <i>Moderate</i> 3 - 4: <i>Major</i></p>	

- This assessment should be carried out directly by the clinician (physician, psychologist, member of the care team ) with the patient during an interview or a more prolonged observation day hospitalization or during the day for patients living in institution.
- The clinician must for each dimension have to perform an overall assessment considering:
  - Observation during a consultation or visit Bedside / during activities outside consultation or visit / during daytime activities in the day care center / when realization of neuropsychological tests assessing executive function and capacity for initiative
  - The information given by the accompanying ( when present )
  - Responses of the subject to self-assessment (quantitative and qualitative aspects) Interpretation of results
- In clinical practice, a score equal to or greater than 4 is pathological

- *For Emotional blunting, please take into account:*
  - Facial mimicry, presence of gestures accompanying conversation;
  - Presence of appropriate emotional reactions during conversations concerning humoristic or sad topics;
  - Emotional reactions following the diagnosis disclosure, or the disclosure of results of complementary medical tests/exams;
  - Presence of appropriate reward-related responses (for instance during a test)

- *For the Lack of initiative, please take into account:*
  - The ability to spontaneously initiate the conversation, to respect turn taking, to ask for clarifications, and the kind interactions with the caregiver, when present (for instance, when the patient is asked a question, does he/she turn toward the caregiver and ask him/her to respond)
  - The initiative taken when entering and going out from the consultation office, and the responses to activities proposals; if the patient undergoes an activity only after external prompts/stimulation, this should be taken into account
  - the performance in cognitive tests assessing proactive behavior and the ability to take the initiative
  - For severe patients make sure you do not score as initiatives repetitive behaviors

- *For the Lack of interest, please take into account:*
  - Interest towards the consultation topics, as shown by mimicry, attention and visual contact with the clinician;
  - Interest towards the staff (does the patient try to understand the role of the different health professionals, or to learn their names?);
  - Interest towards the other patients or residents;
  - Questions asked concerning his/her own health, test results, duration of the stay and time of discharge (for temporary residents);
  - The number and quality of the details provided when talking about personal interests;
  - Questions concerning family members and home environment;
  - Willingness to participate to workshops and group activities, and active participation to them;
  - Number of interests listed during an objective interest tests (eg. TILT test).
  - For patients living in nursing home take into account the agreement to participate in workshops and Entertainment / the Active participation in workshops

## Score for each dimension

- **0** = no problem
- **2** = Moderate problem: one or more of the listed features are present, but not all the time during the consultation/assessment
- **4** = Major problem: most of the listed features are present for most of the time during the consultation/assessment
- Total score / **12**
- **Total score = or Higher than 4 is pathologic**

# Apathy Inventory

## Relation with the Apathy Diagnostic Criteria

### Apathy Inventory

- Lack of initiative
- Lack of interest
- Emotional blunting



### Diagnostic Criteria

- Behavior
- Cognition
- Emotion



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- Benoit M, Clairet S, Koulibaly P.M., Darcourt J, Robert P.H. Brain perfusion correlates of the Apathy Inventory dimensions of Alzheimer's disease. *International Journal of Geriatric Psychiatry* ;19 : 864-869, 2004
- Robert,P.H., Berr,C., Volteau,M., Bertogliati,M., Benoit,M., Mahieux,F., - Legrain,S.,Dubois,B. Neuropsychological performance in mild cognitive impairment with and without apathy. *Dementia and Geriatric cognitive dis.* 21 : 192-197, 2006
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L'IA is validated in french, English, Italian and Spanish with the helps of the EADC teams (European Alzheimer's Disease consortium).

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