Influence of a multidimensional music-based exercise program on selected cognitive and motor skills in dementia patients – A Pilot-Study.

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Author contributions

All authors contributed to the study conception and design. Material preparation, data collection and analysis were performed by [Prinz A.] and [Schumacher A.]. The first draft of the manuscript was written by [Prinz A.] and all authors commented on previous versions of the manuscript. All authors read and approved the final manuscript.

Table 1 cognitive test procedures

cognition				
CERAD-NP-Plus (Morris et al. 1989)				
Test procedure (subtest)	Cognitive area	Declaration		
verbal fluency (animals)	Executive functions	 - name as many animals as possible in one minute - Score is unlimited 		
Boston-Naming- Test	Word finding and naming, visual perception	 the short form contains 15 images that would need to be named 3 groups of items: first group contains 5 frequent items the second group contains 5 medium frequent items, the third group contains 5 rare items 		
Mini-Mental State Examination	General cognitive function level (Screening)	 Answering questions to determine the cognitive abilities of older people maximum 30 points 		
Memory list sum of immediate recall	Verbal memory	 Ten words are read out one after the other and then recalled from memory. is performed three times, are the same ten terms only in different orders Number of remembered terms in the three rounds á ten terms (max. 30 points possible) 		
Constructional praxis copy	Visuoconstructive skills	 4 pictures have to be painted (circle, parallelogram, 2-square, cube) - maximum 11 points 		
Word list delayed recall	Verbal memory (delayed verbal memory)	 free reproduction of the 10 terms from the word list memory test maximum 10 points 		
Word list Recognition recall	Verbal memory (delayed verbal memory, recognition)	 - the 10 already mentioned terms and 10 new terms are presented to the respondent - the respondent has to declare the 10 already mentioned terms as "already known" and the 10 new ones as "not known". 		

Constructional praxis recall	Nonverbal memory (delayed figural memory)	Drawing the figures from the constructive part from memory - maximum 11 points
Trail-Making- Test A	Psychomotor speed, Executive functions	 number linking as fast as possible (from 1-25) - max. 180 s
Trail-Making- Test B	Executive functions	 combine numbers and letters alternately, keeping the numerical and alphabetical sequence, respectively (1-13; A-L) max. 300 s

Quality criteria:

- Reliability: Interrater reliability: ICC = 0.92 1.00 (American version)
- Test-restest reliability: good according to authors
- Validity:
 - Criterion validity: for American version moderate to high correlation with other dementia measures (Ex. R = -.83 Clinical Dementia Rating Scale).
 - Construct validity: sensitive differentiation between healthy and dementia patients and between the severity of cognitive impairment.

Table 2 motor skills test procedure

Motor function				
Test procedure	Motor area	declaration		
modified Chair-Rising- Test (Le Berre et al. 2016)	Strength and coordination of the leg muscles	 Measures how long it takes a respondent to stand up and sit down five times with hand assistance. Score from zero (>60s, high risk of falling) to four (<11.2s, low risk of falling) 		
	Quality criteria:			
	 Reliability: Interrater reliability: ICC = 0.99 - 1.00 Test-retest reliability: ICC = 0.95 - 0.99 Validity: Construct validity: strong convergences with 			
	physical performance (r = -0.59; Incremental Shuttle Walk Test).			

Drop bar-Test (Fetz et al. 1978)	Elementary (simple) reactivity	 Response measured how fast the subject can grasp the falling rod (in cm) subject has three repetitions with the dominant hand best value goes into the evaluation 	
	(Richter & Beuker, 1	(Fetz & Konexl, 1978, p.52); .58	
Hand Dynamometer (Richards et al. 1996)	Hand force (current muscle force)	 grip strength is measured in both hands (in Newton) three repetitions are performed with each hand maximum value is included in the evaluation 	
	followed (Oltman, 20 Reliability: .8996 (Content- and constr (Oltmann, 2012)	if the exact implementation rules are 012). Fetz & Kornexl, 1993) uct-related validity is taken as given dity is also taken as given (Oltmann,	
Timed-Up-and-Go- Test D. Podsiadlo & S. Richardson (1991)	Mobility restriction	The test person is to stand up from a sitting position without assistance, walk back and forth for 3 meters and sit down again (aids are allowed) Score from ≤10s (Everyday mobility unrestricted) to ≥30	
		(Pronounced mobility restriction, usually intervention/ Need for assistive devices)	
	 Quality criteria: Reliability: Interrater reliability: ICC = 0.91 (Rydwik,2011) Test-retest reliability: ICC = 0.96 - 0.99 (Flansbierr,2005) Validity: Criterion validity: Berg Balance Scale (r=0.81), Barthel Index (r=0.78) (Podsiadlo, 1991) 		

Table 3 Quality of life

Quality of life				
Test procedure	Area	declaration		
NOSGER II (Spiegel et al. 1991)	Quality of life (screening)	 Questionnaire filled out by the nursing staff (external assessment) A total of 30 items distributed over the following dimensions: Memory, Instrumental activities Activities of daily living mood social behavior disruptive behavior Response options from "always" to "never low values no or only minor disturbances high values clear disturbances in the behavioral areas 		

Quality criteria:

- Interrater reliability: r = .53 .89
- Retest reliability: r = .84 .92 (2 weeks); r = .75 .93 (30 days)
- Validity:
 - Criterion validity: varying degrees of correlation with external criteria, depending on the dimension considered (ex. MMSE: r = .32 - .82)
 - Construct validity: discrimination between healthy and impaired persons with regard to dementia.