

Mild cognitive impairment



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As we age, we can expect changes in our bodies, and this may sometimes also be true of our brains. You may notice, for example, that it is becoming harder to remember people's names, find the right word to describe something, find your car in large car parks, or get to grips with new technologies or processes at work.

In some cases, this is caused by mild cognitive impairment, or MCI (also known as mild neurocognitive disorder). This refers to small deteriorations in thinking and memory that, while noticeable to the person with the symptoms and those around them, do not interfere too greatly with their everyday life and level of independence. The changes, while small, are greater than would be expected with normal ageing.

MCI can affect:

- short-term memory
- the ability to manage more complex tasks, eg those that involve several steps
- speech fluency
- visual interpretation of the world
- managing emotions

What are the symptoms of MCI?

How you experience MCI will depend on the reasons for the diagnosis, the part of the brain that is affected, and who you are as a person. You may notice changes in your everyday life, and your family and friends may also see changes in your day-to-day abilities, mood and personality.



Symptoms of MCI include:

- difficulty remembering dates and times
- forgetting planned calendar activities
- difficulty with remembering names and finding the right words
- leaving tasks unfinished, such as cooking and DIY
- losing concentration when reading or managing money, such as paying for shopping
- losing track of what you want to say
- changes in social behaviour, for example becoming more subdued or extroverted
- being easily annoyed or irritable

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- changes in judgement, especially around managing risk, for example when it is safe to cross the road or who to trust
- getting lost or feeling more anxious in familiar or public places, and/or when driving
- misplacing items
- losing the confidence to go out and do the things you used to enjoy; feeling like you 'cannot be bothered'

Your family, friends and colleagues may notice these changes and comment that you seem different from how you usually are. It may be useful to talk to people you trust about the changes that you and they have become aware of. You can then decide if you want to get help with the changes.

Not everyone experiences all of the symptoms of MCI. They could be constant or intermittent. You may feel the effects more on some days than on others. If you are tired or in a stressful situation, you may notice them more.

What causes MCI?

The changes associated with MCI can have many different causes, and there may be more than one. They may be temporary, linked specifically to a period of physical illness or poor mental health. These include:

- vitamin deficiency
- underactive thyroid
- infections
- lack of sleep
- medication side effects



- menopause please see Sources of support on p14 for more information
- stress, depression or anxiety
- heart disease
- autoimmune conditions such as rheumatoid arthritis, lupus, Crohn's disease, type two diabetes and multiple sclerosis

Is MCI the same as dementia?

MCI and dementia are not the same. Often, if the underlying causes are treated or managed well, the symptoms of MCI can vastly improve. However, in some cases MCI can be an indicator of the early stages of dementia.

Dementia is caused by damage to a person's brain cells. This may be the result of a build-up of abnormal proteins in the brain (such

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as in Alzheimer's disease, frontotemporal dementia and Lewy body dementia); or problems in the supply of blood to the brain, for example after a stroke (such as in vascular dementia). Please see Sources of support on p14 for information on types of dementia.

Unlike MCI, which may be temporary and can often be improved with the right interventions, dementia will worsen as time goes by.

Being diagnosed with MCI does not mean you will develop dementia, but it can increase the risk. Statistically, one in every 10 people with MCI will eventually be diagnosed with dementia. It is not currently possible to predict who will develop dementia after a diagnosis of MCI.

How is MCI diagnosed?

If you are showing symptoms of MCI and they are troubling you and impacting your life, make an appointment to see your GP. It is helpful if a family member or friend goes with you as they can discuss the changes they have noticed too.

The GP should:

- ask about the symptoms and changes and how they are affecting your everyday life
- take a full medical and family history
- carry out some physical checks, for example of movement, coordination and reflexes
- check your blood pressure and heart rate and arrange blood tests to rule out conditions like thyroid problems and vitamin deficiencies
- conduct some basic tests of memory, concentration and thinking, for example asking you to name some common objects;



remember and recall an address; and complete a simple drawing (often a clockface)

In many cases, these checks will identify an underlying cause of your symptoms. These can often be managed, for example with medication, lifestyle changes or therapies such as mindfulness that may help with managing anxiety.

If the GP cannot find any underlying conditions and feels that the symptoms you are experiencing are not simply normal age-related changes, they may refer you to a specialist service such as a memory clinic. Here, you will have further assessments, including more detailed tests of cognition and a brain scan to check for abnormalities in the brain. This may result in a diagnosis of MCI or – if the symptoms and changes are more severe – a diagnosis of dementia.

If the memory clinic diagnoses MCI, you will be discharged to your GP. Ideally, the GP should invite you for a review after 12 months. If you are not contacted, or if you notice a worsening in your symptoms sooner, you can book an appointment yourself. Please see Sources of support on p13-14 for information on tests for dementia and getting a diagnosis.

Can MCI be treated?

There is no specific treatment for MCI, but if there is an underlying health problem, managing this well by keeping up with regular reviews and taking any prescribed medication for the condition may help improve or manage MCI.

Making some lifestyle changes could also prevent MCI worsening and improve your confidence and your ability to cope with everyday life.

- Try to take regular physical activity such as brisk walking, running, cycling, dancing, swimming, gym, exercise classes and team sports – aim for five days a week for 30 minutes at a time
- Keep socially active, for example by meeting up with friends, taking part in activities outside the home, joining clubs and groups, or volunteering. You could ask friends and family to support you with this
- Aim to follow a healthy diet by eating plenty of fruit and vegetables, ensuring a good balance of vitamins and minerals, avoiding processed food and minimising saturated fats (such as fatty meat, butter, ghee, sausages, bacon, cream), sugar and salt – please see Sources of support on p14
- Keep hydrated aim to drink at least six to eight glasses of fluids per day (water, milk, juice, tea, coffee and squash all count)



- If you drink alcohol, keep within the recommended guidelines: please see Sources of support on p14 for information
- If you smoke, try to stop please see Sources of support on p14
- Do not take recreational drugs
- Look at boosting your brain health with puzzles, card games, board games and other activities that you enjoy
- Ensure you have regular eye tests
- If you notice your hearing is deteriorating, arrange a hearing check

Living with MCI

While lifestyle changes may help to address the underlying causes of MCI and reduce its impact on your life, it is not always possible

to avoid it entirely or stop it worsening. Managing any changes that occur, adapting some of your routines, and accepting support if you need it will help you live as well as possible with MCI. These tips may help:

- Follow a consistent daily routine, for example by waking, having meals and going to bed at the same time each day
- Look for ways to make everyday life easier, for example by shopping in smaller supermarkets, using a calendar to keep track of daily activities, and using voice alerts on a smart speaker or alarms/reminders on your phone
- Take your time over activities such as projects at work, and break them down into smaller steps so they are not overwhelming
- Make clear, step-by-step plans for things that you need to do, for example driving to an unfamiliar place, going on holiday or managing finances
- Keep up with any health checks or medication reviews, eye tests and hearing tests
- If you are comfortable, explain your diagnosis to family, friends and colleagues so they are aware of the changes
- If you have children or teenagers, it may help to explain the diagnosis and how it is affecting you so they understand the reasons for any changes they have seen
- Ask for help if you need it, and be specific about what you need help with, for example shopping, attending an appointment or looking after children to give you a break
- If you feel able, tell your employer about your diagnosis so they can put support in place at work if you need it



 Think about making plans for your future – for example, making a Will and arranging lasting power of attorney, which will allow someone trusted to act on your behalf if you become unable to make decisions about your health, care and finances. This will give you peace of mind that your wishes will be respected. Please see Sources of support on p14 for information on planning for the future and lasting power of attorney

If you are referred to a memory clinic, the assessments will highlight the strengths in your cognition and abilities. You can use these strengths to help you build coping strategies.

Unlike with dementia, you do not always have to inform the DVLA (DVA in Northern Ireland) of a diagnosis of MCI, but if you or your family or friends feel it is affecting your driving, you must notify them. They may request a medical report from your GP or ask you

to take an assessment to see if it is safe for you to drive. For more information, please see Sources of support on p13 and p15.

What to expect after a diagnosis of MCI

If you are diagnosed with MCI, it is useful to keep a record of any changes and symptoms you are noticing, especially if you or your family and friends think they are worsening. You can then make an appointment with your GP to discuss any progression.

If at this stage, the GP feels your MCI is not related to another health condition or normal ageing, they may refer you back to the memory clinic for a review. This may include further memory tests and another brain scan, which can be compared to your previous results.

If the memory clinic specialist goes on to diagnose dementia, they will plan for the ongoing care and support you can access and any help that may be available. This could include medication (if suitable); a care needs and/or home assessment from social services; or attending a support group for people with dementia.

Taking part in research

Research is important to discover more about the causes of MCI and dementia and the possibility of new treatments. If you are diagnosed with MCI, you may wish to take part in these research studies. This might involve trialling new treatments or sharing your experiences to help understand the risk factors for MCI.

If you are interested in participating in research, please visit

ojoindementiaresearch.nihr.ac.uk

Sources of support

If you are living with dementia or caring for someone with the condition, register for our free online sessions, 'Dementia: what next?' at **3** dementiauk.org/dementia-what-next

To speak to a dementia specialist Admiral Nurse, call our free Helpline on **o8oo 888 6678** (Monday-Friday 9am-9pm, Saturday and Sunday 9am-5pm, every day except 25th December) or email **ohelpline@dementiauk.org**

If you prefer, you can book a phone or video call with an Admiral Nurse at a time to suit you: please visit **Odementiauk.org/book**

Dementia UK resources

Advance care planning

dementiauk.org/advance-care-planning

Driving and dementia

dementiauk.org/driving

Early-stage dementia

• dementiauk.org/early-stage-dementia

Employment and dementia

dementiauk.org/employment

Getting a diagnosis of young onset dementia

• dementiauk.org/young-onset-dementia-getting-a-diagnosis

How to get a diagnosis of dementia

• dementiauk.org/getting-a-diagnosis-of-dementia

Lasting power of attorney

dementiauk.org/lasting-power-of-attorney

Menopause and perimenopause

• dementiauk.org/perimenopause-and-menopause

Symptoms of dementia

dementiauk.org/symptoms-of-dementia

Tests for dementia

• dementiauk.org/tests-for-dementia-and-alzheimers

Types of dementia

dementiauk.org/types-of-dementia

What is dementia?

dementiauk.org/what-is-dementia

Young onset dementia section

dementiauk.org/young-onset-dementia

Other resources

Drinkaware alcohol advice

Odrinkaware.co.uk

Needs assessments

gov.uk/apply-needs-assessment-social-services

NHS healthy eating advice

nhs.uk/live-well/eat-well

NHS stop smoking advice

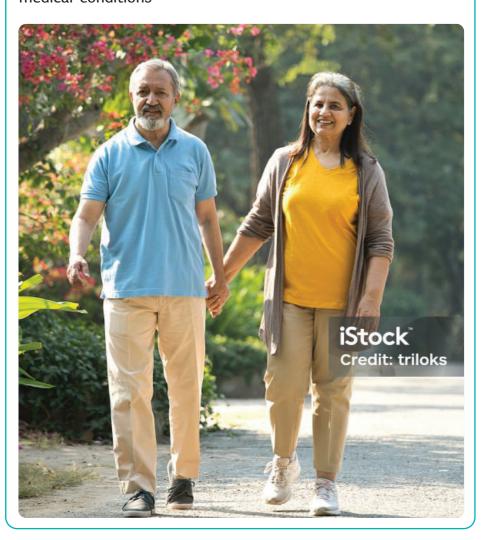
nhs.uk/better-health/quit-smoking

Notifying the DVLA about medical conditions (England, Scotland and Wales)

ogov.uk/driving-medical-conditions

Notifying the DVA about medical conditions (Northern Ireland)

• nidirect.gov.uk/information-and-services/driving-licences/medical-conditions



To speak to a dementia specialist Admiral Nurse about any aspect of dementia:

Contact our Helpline:

o8oo 888 6678 or Ohelpline@dementiauk.org

Book a virtual appointment:

dementiauk.org/book

Our charity relies entirely on donations to fund our life-changing work. If you would like to donate to help us support more families:

- Call **0300 365 5500**
- Visit odementiauk.org/donate
- Scan the QR code

Thank you.













dementiauk.org • info@dementiauk.org

Publication date: April 2025, Review date: April 2028, © Dementia UK 2025

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