
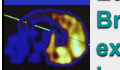


The Frontal Lobes: A Users Guide & WHY THEY MATTER IN REHAB

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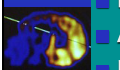




DISCLOSURES

Dr. Benjamin is a partner in Brain Educators, LLC, and co-author of The Brain Card™, a pocket neuropsychiatry examination aid. The Brain Card™ includes tips on “bedside” assessment of executive function, which may overlap with some material in today’s lecture.

All patients seen in video examples consented to use of video in teaching



OUTLINE

- Executive Function Made Easy
- Acquired Frontal Syndromes
- Psychiatric Disorders with Dysexecutive Features
- “Bedside” Assessment of Executive Function

Some Measures of Success in Rehabilitation



- Independent living
- Treatment adherence
- Vocational stability
- Substance avoidance
- Interpersonal relationships

What area of cognitive function is most predictive of success in these areas?

FRONTAL/EXECUTIVE FUNCTION

What is Executive Function?



IF YOU READ THE PSYCHIATRY LITERATURE...

- Something to do with the Wisconsin Card Sort?
- Something to do with Working Memory?

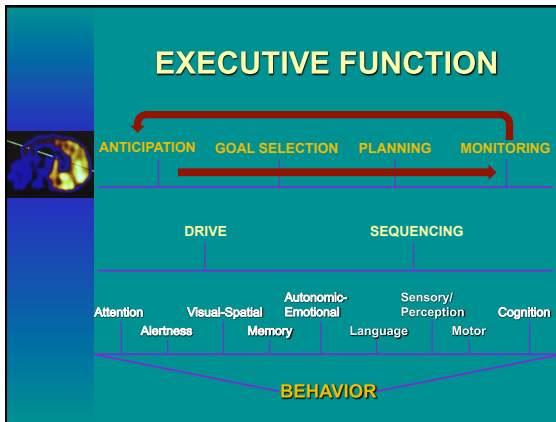
Prefrontal (Executive) Functions Made Easy*

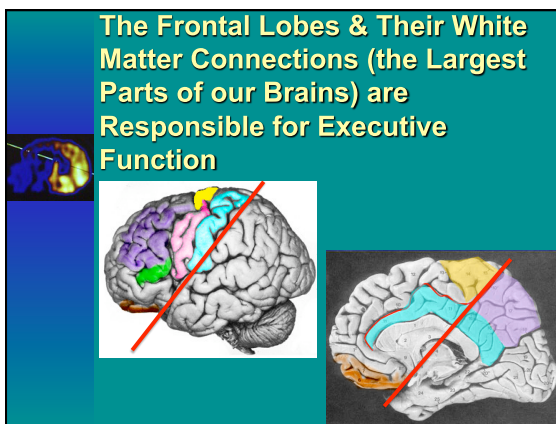


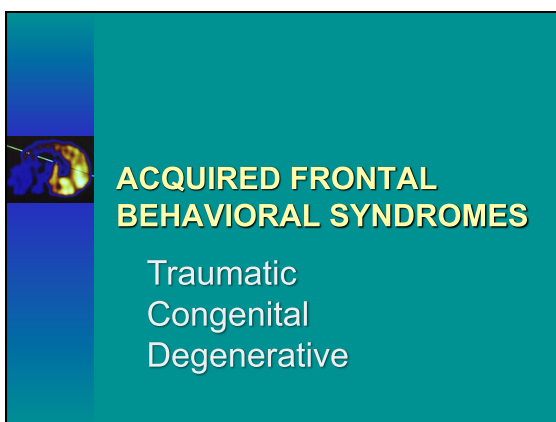
The prefrontal cortex allows us to appropriately comport our behavior to the situation, and to apply what we have learned to novel situations. It allows us to break down ambiguous or overwhelming tasks into a sequence of accomplishable subroutines and keeps us motivated to act independently.

- Appropriately comport behavior to situation
- Apply learning to novel situations
- Break down tasks into sequence of subroutines
- Motivation
- Independence

* According to Benjamin







DSM-IV-TR: Personality change Due to General Medical Condition



- Persistent personality change
- Due to medical condition
- Not explained by another mental disorder
- Not just during delirium; not demented
- Impairs social, occupational or other functioning & causes distress
- Specify type: **Labile, disinhibited, apathetic, aggressive, paranoid, other, combined**

Frontal dysexecutive syndromes
may be included in all 7 subtypes

THE GAGE ACCIDENT Cavendish, VT 9/12/48



Traumatic
Frontal
Executive
Dysfunction

Gage: Harlow's Description



"He is fitful, irreverent, indulging at times in the grossest profanity (which was not previously his custom), manifesting but little deference for his fellows, impatient of restraint or advice when it conflicts with his desires, at times pertinaciously obstinate yet capricious and vacillating, devising many plans of future operation which are no sooner arranged than they are abandoned in turn for others appearing more feasible. A child in his intellectual capacity and manifestations, he has the animal passions of a strong man. In this regard his mind was radically changed, so decidedly that his friends and acquaintances said he was 'no longer Gage.'"

Traumatic
Frontal
Executive
Dysfunction





ORBITOFRONTAL SYNDROME

Orbitofrontal Cortex



Amygdala (Medial Temporal Lobe)

Traumatic Frontal Executive Dysfunction

Neocortical Representation of Limbic System

- Child-like euphoria ("moria")
- Facetious humor ("witzelsucht")
- Shallow, labile affect
- Social disinhibition
- Impaired judgment, tact, foresight
- Impulsive, distractible
- Difficulty maintaining set

ORBITOFRONTAL SYNDROME





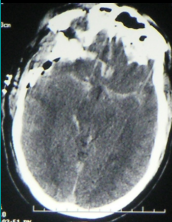
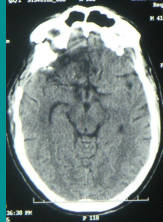
- 38 yo MR woman referred for aggression & non-compliance (explosive outbursts for trivial reasons)
- Shallow, impulsive, un-empathic, child-like affect, but good vocabulary
- Frontal syndrome suspected
- 13 yr f/u after 9/11

Traumatic
Frontal
Executive
Dysfunction

TBI with OF Syndrome

44 yo RH M MVA (motorcycle/no helmet) with SAH, contusions, R frontal fracture. Became angry, sarcastic, disinhibited, "can't see the gray"

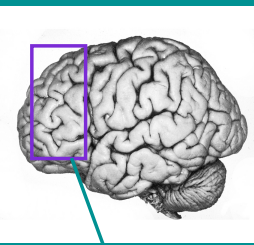


Acute
6 Weeks

Traumatic
Frontal
Executive
Dysfunction

DORSOLATERAL PREFRONTAL SYNDROME



- Abulic, unmotivated
- Apathetic (occasional outbursts)
- Psychomotor slowing
- Concrete, stimulus bound
- Perseverative, poor problem solving, disorganized

Traumatic
Frontal
Executive
Dysfunction


Sensory Integration
Assessment of Emotional Significance



Self-Inflicted GSW



Traumatic Frontal Executive Dysfunction



PREFRONTAL SYNDROMES

DORSOLATERAL


- Abulic, unmotivated
- Apathetic
- Psychomotor slowing
- Poor problem solving
- Occasional outbursts
- "Pseudodepressed"

ORBITOFRONTAL

- Impulsive, disinhibited
- Inappropriate jocularity
- May be hyperactive
- Emotional lability
- Frequent outbursts
- "Pseudopsychopathic"





Traumatic Frontal Executive Dysfunction



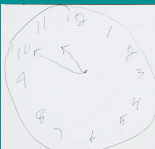
MIXED FRONTAL SYNDROME

- 34 year old single RH computer technician fell while intoxicated
- s/p L f-p fracture, SDH, bifrontal ICH, VP shunt
- Mild spastic R HP, incontinence, perseveration, decreased verbal fluency, stimulus-bound behavior, marked executive dysfunction
- Impulsive, irritable, concrete, denied deficits, apathetic, explosive, sensitive to environmental cues



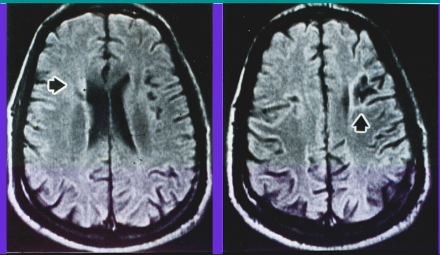
ACUTE

CHRONIC



Traumatic Frontal Executive Dysfunction

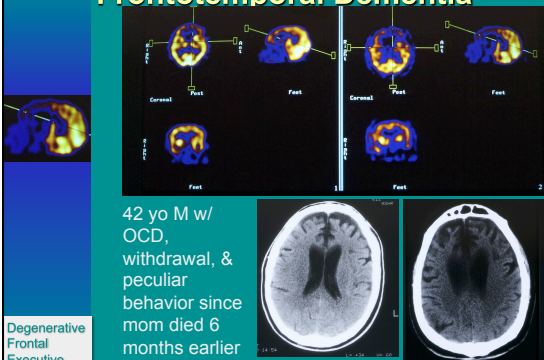
CONGENITAL FRONTAL SYNDROME (G.K.)



Congenital Frontal Executive Dysfunction

(Price et al, 1990)

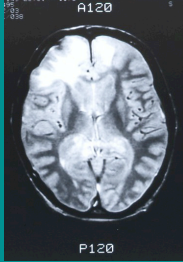
Frontotemporal Dementia



Degenerative Frontal Executive Dysfunction

42 yo M w/ OCD, withdrawal, & peculiar behavior since mom died 6 months earlier

TBI Frontal Dysexecutive Syndrome: 20 Year Follow-up



Traumatic Frontal Executive Dysfunction

- 41 yo RH M 20 yrs s/p MVA with R Frontal fracture and ICH (2 wk PTA), spastic quadraparesis, dysarthria
- Unable to understand why wife recently left him. Unable to adjust to new job responsibilities
- Poor concentration, very distractible, can't analyze errors, unaware of deficits, occasionally suspicious

Psychiatric Disorders with Dysexecutive Features



- Schizophrenia
- ADHD
- OCD
- Major Depression
- Mania
- Tourette Syndrome
- Substance Dependence

BEDSIDE ASSESSMENT OF EXECUTIVE FUNCTION




Is There an Executive Function Test in the Basic Mental Status Exam?



- The entire patient interaction
- Aspects of the history
- Behavioral observations
- Much of the MSE & cognitive assessment


Assessment
of Executive
Function



Evidence of Executive Function is Ubiquitous

- Planning/anticipation/foresight
- Self error monitoring
- Social awareness
- Ability to follow sequential commands

Assessment
of Executive
Function




ASSESSMENT OF FRONTAL FUNCTION

Neurological Examination

- Forced grasping
- Grope
- Gegenhalten
- Motor impersistence
- Gait
- Waxy flexibility

Assessment
of Frontal
Function




ASSESSMENT OF FRONTAL FUNCTION

OBSERVATIONS

- Perseveration (establish, change, maintain set)
- Free will
 - Imitation behavior
 - Utilization behavior
 - Pull to stimulus
 - Alien hand
- Complexity of thought (vs simplicity)
- Apathy
- Impulsivity
- Foresight/planning
- Empathy
- Expressive emotional prosody
- Verbal fluency
- Confabulation
- Appetite, sexuality, humor

Assessment
of Executive
Function




ASSESSMENT OF FRONTAL FUNCTION

STANDARD MSE

WORLD or months backward
 Serial 7's
 Similarities
 Proverbs: Familiar & unfamiliar
 Insight: Did patient request treatment?
 Judgment: What are your plans?

Assessment of Executive Function




ASSESSMENT OF FRONTAL FUNCTION

ADDITIONAL BEDSIDE TESTS

Complex problem solving	Verbal sequencing task
Alternating sequences/multiple loops	Non-verbal sequencing task
Draw-a-clock	Word list generation
Cognitive estimation	2:1 Alternating motor task
Conceptual series completion	Go/no-go task
Motor sequencing task (Luria 3 step)	Rhythmic tapping

Assessment of Executive Function



Complex Problem Solving

AN EXCELLENT FRONTAL SCREEN TASK


If I were to give you \$5 and ask you to buy 4 packs of nuts at 89¢/pack, how much change would you receive?
 $\$5 - (4 \times 0.89) =$

Requires

- Working memory
- Arithmetic
- Cognitive estimation
- Error checking
- Sequencing

Assessment of Executive Function

Alternating Sequences



Assessment of Executive Function


Normal

Perseveration/Poor Error Checking

Stimulus Bound

Pull to Stimulus

Alternating Sequences




Assessment of Executive Function

Normal

Recurrent Perseveration


Multiple Loops




Assessment of Executive Function

Pull to Stimulus

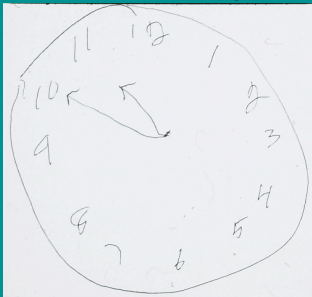
Continuous Perseveration



"I just asked you to stop doing that..."




Draw-A-Clock Task (11:10)




Assessment of Executive Function

Stimulus bound: pulled to the 10




"When others on the unit are yelling she always begins to yell, too."




Cognitive Estimation

- How many people would you guess can fit on a crowded city bus?
- How many miles across is our state?
- How many feet long is this room?
- How many feet high is the ceiling?
- How long is the average person's spine?

Assessment
of Executive
Function



“How much money do you think you would need each month to pay your living expenses?”




Conceptual Series Completion

Fill in the blank:

A_Z B_Y C_X D_{_}

Assessment
of Executive
Function




Verbal Sequencing Task


Arrange the words to form a sentence:

RIGHT HAND CHANGE THE HIM
HAND HIM THE RIGHT CHANGE


Assessment of Executive Function




Nonverbal Sequencing




Assessment of Executive Function




Nonverbal Sequencing



Assessment of Executive Function




“You know what we discussed. Before you can be discharged you have to...”



Word List Generation

- **Broad Category:** List all the words you can think of that begin with the letter “b” (but not capital “B”). You have 1 minute. *NI=12/min*
- **Narrow Category:** List all the animal names you can think of-- they can be farm animals; jungle animals; animals of the land, sea, or air; pet animals; wild animals; & they can start with any letter. You have 1 minute. *NI=18/min*

Assessment of Executive Function



2/1 Alternating Task; Go/No-go

- “When I hold up 1 finger, you hold up 2. When I hold up 2, you hold up 1”
- “When I hold up 1 you still hold up 2, but when I hold up 2, keep your hand down & don’t do anything”

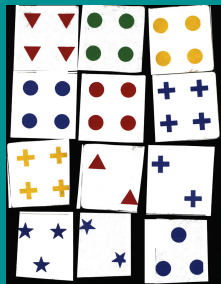
Selected Neuropsychological Tasks

- Wisconsin Card Sorting Task
- Stroop Color Interference Test
- Iowa Gambling task
- Trails B



Assessment
of Executive
Function

Wisconsin Card Sort




Assessment
of Executive
Function

Stroop Test

RED	XXXXX	GREEN
GREEN	XXXXX	BLUE
RED	XXXXX	RED
BLUE	XXXXX	BLUE
BLUE	XXXXX	GREEN
GREEN	XXXXX	RED
BLUE	XXXXX	GREEN
RED	XXXXX	BLUE



Assessment
of Executive
Function




Iowa Gambling Task

WIN \$120!

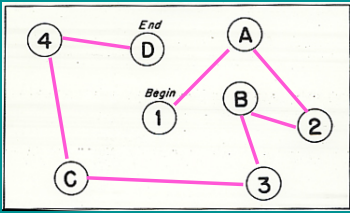
Bad Decks: A, B
Good Decks: C, D

	A	B	C	D
Gain/Deck	\$100	\$100	\$50	\$50
Loss/10 cards	\$1250	\$1250	\$250	\$250
Net/10 cards	-\$250	-\$250	\$250	\$250
Rewards/10 cards	5	1	5	1


Assessment of Executive Function



Trails B (sample)



Assessment of Executive Function



EXECUTIVE FUNCTION IS A MAJOR CONTRIBUTOR TO SUCCESS IN REHABILITATION

IT'S TIME FOR PSYCHIATRY TO UNDERSTAND IT!
