

Restrictive, obstructive lung disease linked to dementia risk

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respectively) in an analysis using adjudicated outcomes. In analyses restricted to nonsmokers, associations were similar, and they were observed for both Alzheimer's disease-related dementia and cerebrovascular etiologies. There were correlations for low forced expiratory volume in one second percentage predicted and forced vital capacity percentage predicted with increased dementia risk.

"In this large prospective community-based cohort both [lung disease](#) and impaired lung function were associated with greater risk of dementia and MCI over 23 years of follow-up, with evidence that this occurred for dementia due to both Alzheimer's disease and vascular etiologies," the authors write.

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(HealthDay)—Both restrictive and obstructive lung disease are associated with an increased risk for incident dementia and mild cognitive impairment (MCI), according to a study recently published in the *American Journal of Respiratory and Critical Care Medicine*.

Pamela L. Lutsey, Ph.D., M.P.H., from the University of Minnesota in Minneapolis, and colleagues asked 14,184 individuals who underwent spirometry about their lung health (1987 to 1989). Hospitalization diagnosis codes were used to define dementia and MCI through 2013 in the whole cohort, and adjudication was used to define dementia and MCI among 42 percent of participants who attended a comprehensive neurocognitive exam (2011 to 2013).

The researchers found higher odds of dementia or MCI among participants with restrictive and [obstructive lung disease](#) compared with those without disease or [respiratory symptoms](#) (multivariable-adjusted odds ratio, 1.58 and 1.29,

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