

Functional Cognitive Disorder: A Complex and Often Misunderstood Condition

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Introduction

Functional Cognitive Disorder (FCD) is a condition characterized by subjective cognitive complaints that cannot be explained by typical neurodegenerative diseases, such as Alzheimer's disease, nor by psychiatric disorders like depression or anxiety. Individuals with FCD experience genuine cognitive difficulties, which significantly impact their daily lives, yet these issues are not associated with measurable neurological abnormalities. This disorder falls under the broader category of functional neurological disorders, where symptoms are related to functional rather than structural brain changes. Patients with FCD commonly report a range of cognitive symptoms, including memory problems, attention and concentration issues, and executive dysfunction. Memory complaints often involve difficulties with short-term memory, such as forgetting recent conversations or the location of everyday items, and these memory lapses can be inconsistent and fluctuate in severity. Attention and concentration problems manifest as trouble maintaining focus on tasks, becoming easily distracted, or experiencing mental fatigue with minimal cognitive effort.

Description

Executive dysfunction may involve challenges with planning, organizing, and multitasking, making it hard for individuals to initiate tasks or follow through with complex activities. A defining characteristic of FCD is the strong awareness and concern about cognitive performance, which is often disproportionate to objective findings, leading to significant distress for the patient. Diagnosing FCD is complex and requires a thorough evaluation to rule out other causes of cognitive impairment. This diagnostic process includes a detailed clinical history to understand the onset, nature, and progression of symptoms, as well as to identify any potential psychological or stress-related factors. A comprehensive neurological examination is necessary to exclude neurological diseases, and neuroimaging, such as MRI or CT scans, is performed to rule out structural brain abnormalities. Psychological evaluations help assess for psychiatric conditions that could contribute to cognitive complaints, although significant psychiatric findings are usually absent in FCD. Objective cognitive testing often shows normal or non-specific results, which do not align with the severity of subjective complaints, a hallmark feature of FCD. The pathophysiology of FCD remains unclear, but several theories exist. One theory suggests that dysregulation in attention and perception mechanisms may lead to an

increased awareness of normal cognitive lapses, which are then perceived as significant problems. Psychological factors, including stress, anxiety, and depression, can exacerbate or mimic cognitive symptoms, although FCD persists even without major psychiatric disorders. Additionally, patients may develop maladaptive cognitive strategies, such as excessive checking and monitoring of their cognitive performance, which increases anxiety and perceived cognitive decline. Managing FCD involves a multifaceted approach that focuses on education, cognitive rehabilitation, and addressing underlying psychological factors. Educating patients about FCD is crucial, as it helps them understand that their symptoms are real but not indicative of neurodegenerative disease, alleviating fears of progressive dementia. Cognitive-behavioral therapy can effectively address maladaptive thoughts and behaviors related to cognitive symptoms by teaching techniques to reduce excessive monitoring and anxiety about cognitive performance. Stress management strategies, including mindfulness, relaxation exercises, and stress reduction techniques, indirectly improve cognitive function by reducing stress. Cognitive rehabilitation programs can enhance specific cognitive skills and overall cognitive functioning, focusing on attention, memory strategies, and executive function tasks. Supportive therapy provides ongoing psychological support to help patients cope with the emotional impact of their symptoms and improve their quality of life. Regular follow-up with healthcare professionals is essential for continuous monitoring and adjustment of treatment strategies as needed.

Conclusion

The prognosis for individuals with FCD varies, with many patients experiencing improvement through appropriate intervention, particularly when psychological factors are effectively addressed. However, some patients may have persistent symptoms that require long-term management. Early recognition, accurate diagnosis, and comprehensive management tailored to the individual's needs are crucial for favorable outcomes. In conclusion, functional cognitive disorder is a complex and often misunderstood condition that poses challenges for both patients and healthcare providers. Recognizing the genuine nature of the cognitive complaints and adopting a holistic management approach can significantly improve the lives of those affected by FCD. Increased awareness and continued research are essential to enhance understanding and treatment of this intriguing disorder, ultimately providing better care and support for patients.

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