

What is mild cognitive impairment (MCI)?

Mild cognitive impairment is when a person starts to have [problems with their memory](#) or thinking. These may cause difficulties, but not so much that they interfere with doing everyday tasks.

For some people MCI is an early sign of a disease that will eventually cause [dementia](#). However, MCI is not dementia. It can be caused by other health problems, such as sleep disorders or the side effects of medicines.

Some mental abilities, such as memory and concentration, can become less reliable as a person gets older. This often becomes more noticeable around age 60 and older. It can be frustrating, but it rarely stops a person from doing normal everyday activities.

However, some people feel these changes more quickly, and may become worried that something is wrong with them.

If a person regularly has difficulty doing certain mental tasks they used to do very easily, it may be a sign that they have 'mild cognitive impairment'.

Mild means that, although symptoms may be troubling, the person is still able to manage themselves well and do most everyday activities.

Cognitive roughly means 'thinking' but also includes the abilities to learn, remember, understand, pay attention, communicate, or process sensory information.

Impairment means not working as well as expected for the person's age and background.

Symptoms of mild cognitive impairment

Many people struggle with their memory or thinking from time to time. This can easily happen when a person is feeling tired, unwell or stressed. It can happen more often as they get older.

However, if problems with thinking continue for more than a few months, it could be a sign that they have MCI.

MCI involves problems with one or more thinking skills. For example:

- memory or learning – difficulties remembering recent events or learning new things
- reasoning – struggling to make decisions or work through everyday problems
- attention – finding it more challenging to focus on a task or filter out distractions
- [language](#) – having difficulties finding the right word in conversation
- loss of interest or motivation – less interest in usual activities or hobbies.

People with MCI often have difficulties remembering things as well as they once did. Others describe more of a 'brain fog' where they feel unable to think clearly.

Is MCI different to dementia?

Having MCI is not the same as having dementia. A person with MCI has milder symptoms, which means they are still able to do most everyday tasks without support.

MCI can be caused by lots of different health problems, whereas dementia is always caused by a disease that damages the brain.

Dementia is [progressive](#), which means it always gets worse over time. This isn't always the case for MCI.

Anyone can develop MCI at any age. However, the risk increases greatly as a person gets older. MCI can have a number of different possible causes - some of these are treatable but others are not.

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Mild cognitive impairment (MCI)

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There are many potential causes of MCI. Some of them are treatable and get better, while others may not.

For many people it's not possible to know what's causing their MCI, although it may become clearer over time.

A person can develop MCI at any age. However, the risk increases greatly with older age. About 1 in 4 people in their early 80s has MCI.

MCI caused by a treatable health condition

Sometimes MCI is caused by a health condition that can get better with time and treatment. These include:

- sleep disorders – for example, not being able to sleep (insomnia) or not breathing easily while asleep (sleep apnoea)
- side effects of medicines that cause confusion or drowsiness
- having low blood pressure
- mental health problems, such as depression, anxiety or long-term stress

- [functional cognitive disorder](#)
- sight or hearing loss
- infections, including the after-effects of COVID or other viruses
- severe constipation
- regularly drinking too much alcohol
- high or low levels of vitamins, minerals, hormones, or sugars in the body.

The effects of these may be worse if the person is also frail, tired, or in pain.

About 4 in 10 people with MCI will get better. However, there's no guarantee that their recovery will be permanent. Many people who get better from MCI have similar problems again later.

Some people with MCI get better over time even without medical treatment. This may be the case if they are recovering from a very stressful period, such as a bereavement or a viral infection.

Recovery can often be made easier with help from counselling, peer support groups or rehabilitation services.

MCI caused by a stable or progressive condition

MCI may sometimes be caused by a health condition affecting the brain. When this happens, the condition could be:

- stable – memory and thinking don't improve, but also don't get worse.
- progressive – the condition gets worse over time and eventually leads to a diagnosis of dementia.

Stable MCI can happen with long-term health conditions that cause minor problems with thinking, but rarely lead to dementia. Conditions that can do this include heart failure, epilepsy, lung or kidney disease, and some types of stroke.

MCI caused by a stroke can be unpredictable. A person may remain stable for many years or they could decline more quickly and develop dementia. It's very difficult to predict what will happen to any individual person.

When MCI is being caused by a progressive brain disease like [Alzheimer's](#) or [Lewy body disease](#), it will get worse over time. Eventually MCI turns into dementia, although the time it takes to get to this stage varies a great deal from person to person.

Reducing the risk of mild cognitive impairment

Although getting older is the biggest risk factor for MCI, evidence shows there may be things a person can do to reduce their long-term risk, with the right support.

These changes mainly involve keeping the body healthy and preventing damage to the brain. They include:

- being physically active
- eating healthily
- not smoking
- drinking less alcohol
- staying mentally and socially active
- looking after other health conditions, such as high blood pressure or diabetes.

It's best to start from at least midlife, during your 40s and 50s. However, it's never too late for the brain to get at least some benefit from living more healthily.

Diagnosing and getting treatment for MCI

Diagnosing MCI can help people get access to any help or support they may need. Thinking problems can be assessed at the GP or a memory service.

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Getting a mild cognitive impairment diagnosis

Step 1: Seeing a GP

The GP will ask about a person's symptoms. This includes when they started and how they are affecting their daily life.

They will review the person's physical health and any medicines they are taking. They will also briefly test their thinking skills.

If the GP thinks there may be a problem with memory or thinking they will normally refer the person to their local memory service for a specialist assessment.

They will also request some routine blood tests to check for treatable causes, such as physical health problems.

Step 2: Seeing a specialist

A specialist clinician will ask about problems with memory or thinking and how they have been causing difficulties with everyday activities. They may also ask about other health problems or what's going on in a person's life.

They will then ask questions which are designed to test memory and thinking. Once this is done, they will try to explain what they think the cause of these problems could be.

They may request a brain scan to check that symptoms aren't being caused by a brain injury or tumour. A brain scan isn't always necessary, but for many people it can provide useful information to get a more accurate diagnosis.

Sometimes they may ask to do more assessments if they don't feel able to give a diagnosis.

A diagnosis of MCI is usually given when a person's memory or thinking is worse than would be expected for their age but it's not affecting their ability to do everyday activities.

Benefits of knowing you have MCI

- Many people are relieved when they are told that they have MCI because it means that there is still a good chance that their symptoms won't get worse.
- A diagnosis of MCI can be helpful for anyone struggling to convince people around them that they have a problem and need help or support.
- It can prompt health professionals to explore treatable causes of MCI. This could be hearing loss, mental health or sleep problems, which otherwise might have gone unnoticed.

- A diagnosis can sometimes help to get access to support such as practical strategies to help with memory and thinking. It can also be an opportunity to make positive changes that could reduce the risk of the condition progressing to dementia.

Getting treatment for mild cognitive impairment

There are currently no medicines that are licensed to treat MCI or which reduce the chances of developing dementia.

Symptoms can sometimes improve when a health problem that's contributing to the condition is treated effectively. This might involve a referral to another specialist clinic, such as a sleep clinic or mental health service.

However, for many people it's not clear what is causing their MCI and so the best option may be to wait and see.

Waiting for a diagnosis can be emotional, and lots of people find it affects their wellbeing and day-to-day life. Looking after physical and mental health is especially important during a difficult time like this.

Once a person has been told they have MCI they will often be referred back to the care of their GP. If their condition gets worse, the GP will refer them back to the memory service for a follow-up assessment.

The memory service should also direct a person with MCI to local sources of support, where these are available.

Getting regular checkups for MCI

Some memory services ask a person with MCI to come back in 6 or 12 months for a routine follow-up appointment. If symptoms continue to get worse before then, contact the GP.

The GP can refer a person back to the memory service for further assessment. This is particularly the case if their symptoms are making it difficult to do everyday activities without help.

If MCI has developed into dementia, then the memory service may be able to help with medicines and other support.

Do people with MCI always develop dementia?

About one in every seven people diagnosed with MCI by their memory service will develop dementia over the next 12 months. However, around one in two (half) the people diagnosed with MCI will have dementia after five years.

The risk of progressing to dementia may be greater for some types of people than for others:

- **Age:** If a person is older, they are more likely to develop dementia. The majority of people with MCI younger than 65 do not develop dementia.
- **Symptoms:** If a person has problems with their memory, rather than other aspects of thinking, they are slightly more likely develop dementia. This also happens if they have problems with several different types of thinking skills.
- **Other health conditions:** Some long-term health problems increase the risk of MCI getting worse and becoming dementia. These problems include depression, diabetes, high blood pressure and being very overweight.
- **Frailty:** Being frail also increases the risk of MCI becoming dementia. Frailty is when a person is more vulnerable to illness or injury. This is because of a combination of old age, declining physical strength and other long-term health problems.

- Physical evidence of risk: If a scan shows clear evidence of changes to the health of the brain in a person with MCI, this might mean they have a higher chance of developing dementia. Occasionally a person may also have tests carried out on their spinal fluid which can show evidence of brain disease.