Appendix 1: Search strategy for relevant articles on the diagnosis and treatment of mild cognitive impairment*

We performed a comprehensive electronic search of the MEDLINE and EMBASE databases for articles published from January 1996 to December 2005. We used the following primary search terms: "questionable dementia" OR "age-associated cognitive decline" OR "cognitive impairment" OR "cognitive impairment no dementia" OR "mild cognitive impairment." We combined these terms with the following secondary search terms: "concept," "criteria," "diagnosis," "therapy" or "management." We also included additional articles from personal files and those identified from the references of included and excluded articles.

We identified 1729 articles. Of these, 314 were considered to be relevant and of good or fair quality on the basis of their methodologic quality and presentation of original data. We separated the articles into the following categories by what they addressed: the concept, natural history and pathology of the conditions (190 articles); diagnosis (80); nonpharmacologic therapy (16); and pharmacologic therapy (28).

For therapy, we performed a standardized analysis of the quality of the evidence, integrating a rating of the quality of the report (using the Jadad scale[1]) and quantitative aspects such as statistical significance and magnitude of effects.

Subsequent to the conference, we identified a further 754 articles published between January 2006 and January 2008. No changes to the recommendations were deemed necessary on the basis of this further analysis.

*The literature search was used to generate evidence on which the recommendations from the Third Canadian Consensus Conference on the Diagnosis and Treatment of Dementia were based.

Reference

1. Jadad AR, Moore RA, Carroll D, et al. The quality of reports of randomized clinical trials: Is blinding necessary? *Control Clin Trials* 1996;17:1-12.