Central and peripheral agraphia in Alzheimer’s disease: from the case of Auguste D. to a cognitive neuropsychology approach.

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Fig 1: Number of correct responses by controls and AD patients in the spelling tasks.
Fig 2: Nature of errors in control and AD groups for each type of item and each modality of output.

PPE: phonologically plausible errors; NPPE: non-phonologically plausible errors; NR: non-response
Fig 3: Number of correct responses (/23) by control and AD groups for the two types of case and peripheral tasks.
Fig 4: Nature of errors in the three peripheral tasks and in each case.

Legends of figures

Fig 1: Number of correct responses by controls and AD patients in the spelling tasks.

Fig 2: Nature of errors in control and AD groups for each type of item and each modality of output.

Fig 3: Number of correct responses (1/23) by control and AD groups for the two types of case and peripheral tasks.

Fig 4: Nature of errors in the three peripheral tasks and in each case.
APPENDIX

Fig. a) Mental imagery of letters: lower-case cursive letters

Basis writing line

Ex: “Point to the frame in which you could write the letter « m » in lower-case cursive style?”

Fig. b) Mental imagery of letters: upper-case print letters

Ex 1: “Point to the stroke which is present in the letter « F » in upper-case print style”.

Ex 2: “Point to the stroke which is present in the letter « M » in upper-case print style”.

Fig c) Visuoconstrutional abilities: Copying from models

Examples N° 5-10-18 taken from the Goldstein-Scheerer Stick Test, (Goldstein and Scheerer, 1973)