

Six-item Cognitive Impairment Test (6CIT)

This article is for **Medical Professionals**

Professional Reference articles are designed for health professionals to use. They are written by UK doctors and based on research evidence, UK and European Guidelines, so you may find the language more technical than the **condition leaflets**.

The 6-item Cognitive Impairment Test (6CIT) Kingshill Version 2000® was developed in 1983.

^[1] This was by regression analysis of the Blessed Information Memory Concentration Scale (BIMC).

^[2] The 6CIT is a useful dementia screening tool in Primary Care. It was used in a large European assessment tool (Easycare©) and with new computerised versions its usage is increasing.

Six-item Cognitive Impairment Test (6CIT) - Kingshill Version 2000

1. What year is it?	Correct - 0 points Incorrect - 4 points
2. What month is it?	Correct - 0 points Incorrect - 3 points
3. Give the patient an address phrase to remember with 5 components - eg: John, Smith, 42, High St, Bedford.	
4. About what time is it (within one hour)?	Correct - 0 points Incorrect - 3 points
5. Count backwards from 20-1.	Correct - 0 points 1 error - 2 points More than one error - 4 points
6. Say the months of the year in reverse.	Correct - 0 points 1 error - 2 points More than one error - 4 points
7. Repeat address phrase.	Correct - 0 points 1 error - 2 points 2 errors - 4 points 3 errors - 6 points 4 errors - 8 points All wrong - 10 points
6CIT score = <input type="text"/> /28	<input type="text"/>

Many thanks to Dr Patrick Brooke, General Practitioner & Research Assistant in Dementia for his help with the original article. The Kingshill Research Centre, Swindon, UK owns the copyright to The Kingshill Version 2000 of the 6CIT but allows free usage to healthcare professionals.

- **Number of questions:** 6.
- **Time taken to perform:** 3-4 minutes.
- **Score:** the 6CIT uses an inverse score and questions are weighted to produce a total out of 28. Scores of 0-7 are considered normal and 8 or more significant.
- **Advantages:** the test has high sensitivity without compromising specificity, even in mild dementia. It is easy to translate linguistically and culturally.
- **Disadvantages:** the main disadvantage is in the scoring and weighting of the test, which is initially confusing; however, computer models have simplified this greatly.
- **Probability statistics:** at the 7/8 cut-off: Overall figures - sensitivity = 90%, specificity = 100%; in mild dementia, sensitivity = 78%, specificity = 100%.

The 6CIT is a much newer test than the [Abbreviated Mental Test \(AMT\)](#). It would appear to be culturally and linguistically translatable with good probability statistics; however, it is held back by its more complex scoring system. Furthermore, it would be nice to see some additional larger population studies using the test.

FURTHER READING AND REFERENCES

1. [Brooke P, Bullock R](#); Validation of a 6 item cognitive impairment test with a view to primary care usage. *Int J Geriatr Psychiatry*. 1999 Nov 14(11):936-40.
2. [Blessed G, Tomlinson BE, Roth M](#); The association between quantitative measures of dementia and of senile change in the cerebral grey matter of elderly subjects. *Br J Psychiatry*. 1968 Jul 114(512):797-811.

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