

SOCIAL COGNITION IN PATIENTS WITH DISSOCIATIVE AMNESIA

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Introduction: Dissociative amnesia is triggered by psychological stress or trauma. Its hallmark is a severe (usually retrograde) memory impairment within episodic-autobiographical domain, occurring without evidence of significant brain damage on conventional structural brain imaging.

Objectives: This work's objectives are establishing greater recognition of possible relations between memory performance and social cognition in patients with dissociative amnesia.

Aims: We review data on social cognition (affective and cognitive theory of mind, simulation, empathy, social judgment, moral judgment) from our own patients with dissociative amnesia.

Methods: Patients were investigated medically, psychiatrically and with neuropsychological and neuroimaging methods.

Results: Patients with dissociative amnesia show variable degrees of impairments of components of social cognition, based on their comorbid conditions (e.g. concurrent clinical or subclinical depression), types of memory impairments (e.g. extent of retrograde amnesia, presence of autobiographical semantic deficits), pattern of brain metabolic changes, personality characteristics, neuropsychological profile (performance on executive functions or emotional processing) and testing paradigms.

Conclusions: The impairment in dissociative amnesia seems to go beyond the conscious mnemonic deficit, encompassing various aspects of social information processing. Knowledge about the pattern of metabolic and micro-structural brain changes in patients with dissociative amnesia as well as a fine-grained analysis of the neural correlates of various aspects of social cognition might provide an understanding of when and how episodic-autobiographical memory contributes to social cognition. As several studies emphasized, some structures involved in mnemonic processing may also play a role in social perception, cognition and behavioural regulation, including future-minded choice behaviour.