Clinical Profile of Neurocognitive Dysfunction in Major Depression

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Neurocognitive Dysfunction is common, not only in bipolar but also in unipolar depression. In about 15% of cases, cutbacks in different cognitive domains outlast symptomatic clinical remission and affect the capacity for functional performance and social re-integration. Here, we demonstrate the profile of cognitive impairments during a depressive episode and particularly focus on the time after remission. Compared to healthy controls, patients with remitted MDD show more deficits in their non-verbal memory function. Moreover, participants with remitted MDD demonstrated difficulties in organizing non-verbal information appropriately during learning. Another line of research shows that, although actual performances of remitted patients in different cognitive domains may equal those of healthy controls, there is evidence that increased brain activity in the relevant structures has to be recruited. More research is needed not only to uncover the neural underpinnings of these impairments but also to assess their impact on the recovering of psycho-social functions.