



### Poster Presentation

## A Review of Memory Cognitive Function in Patients with Posttraumatic Stress Disorder (PTSD)

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#### **Abstract**

Memory impairment is one of the main features of post-traumatic stress disorder (PTSD). There are multiple studies in memory impairment and cognitive function such as memory in a variety of explicit memory, implicit, procedural, active, declarative, revermid, working, visual, false and autobiographical. The methodology of systematic review were, meta-analyzes and controlled studies of sites Med line, Pubmed, Psycho info, Psycholit is from 1998 to 2016. Jenkins and colleagues in their study found that patients with PTSD associated with damage to the hippocampus in the temporal lobe lesions may reflect issues related to the learning style of visual perception (Jenkins, 1998). The purpose of Moradi et al study was to showed that patients with PTSD in autobiographical memory is more holistic and less specific memories report (Moradi et al., 2010). Jensen and colleagues suggested that previous reports of impaired discrimination performance after medial temporal lobe damage in PTSD patients may reflect impaired learning rather than impaired visual perception. The findings support the fundamental idea that memory is a distinct cerebral function separable from other perceptual and cognitive abilities. (Jensen, 2011). They suggested that even rapidly learned associations can be supported when an incidental encoding procedure termed “fast Mapping” (FM) is used. They tested memory-impaired patients with bilateral damage to hippocampus and patient with PTSD. Participants saw photographs and names of them that were previously unfamiliar. Instead of asking participants to study name-object pairings for a later memory test, participants answered questions that allowed them to infer which object corresponded to particular name. (Christine, 2013). McDermott in his research showed that in patients with PTSD with impaired executive function, working memory is impaired (McDermott, 2016). The researchers found that, explicit memory, implicit, procedural, active, declarative, revermid, working, visual, false and autobiographical, proprietary significantly are affected in patients with PTSD than other groups (Moradi et al., 2012, MIRZAEI comply, 2015).

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