Background

Head injuries introduce sequelae of affective, behavioural, cognitive, and social dysfunction. Physical and cognitive deficits can often be compensated, but chronic when anticipating potential consequences to an upcoming decision.[5,6]

While these persons have the capacity to emotionally respond to the feedback about their choices, they may have attenuated emotional displays of affect.[7]

While the neuropsychological and physiological consequences of moderate to severe injuries to the vPFC/OFC are well researched, minimal investigation has been directed toward understanding the ramifications. MHI provides a unique contribution to affect recognition performance, independent of other executive reasoning abilities.

Hypotheses:

(H1) It is expected that both groups will exhibit similar cognitive performance.

(H2) A history of MHI will be expected to uniquely contribute to affect recognition performance, independent of abstract and social reasoning.

Methods

• 40 Brock University students (23 females, 15 males)
• 40% (n = 16) self-reported a history of MHI

Measure

Neuropsychological measures included (i) Cognitive Flexibility[8,9], (ii) Abstract Reasoning[10,11], (iii) Social Reasoning[12], and (iv) Affect Recognition[13].

Demographic Questionnaire to assess history of MHI: Have you ever had a head injury resulting in an altered state of consciousness (including: vomiting, dizziness, seeing stars, confusion)?

Results

Study 1

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