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Amnesia

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Amnesia refers to the acquired impairment of explicit long-term memory, that is, when remembering requires overt reference to the learning phase. It can be due to brain lesions (neurogenic amnesia) or to psychological factors (psychogenic amnesia). When it concerns the period after the onset of the disease (organic or psychogenic), it describes impaired encoding, retention or retrieval of episodic memory (memory for specific personally lived events and newly learned information) and is called anterograde amnesia. When it concerns the period before the onset of the disease, it describes impaired autobiographical memory (the narrative of one's own life) and it is called retrograde amnesia.

Short-term memory and implicit learning and memory are preserved. The other components of long-term memory may be spared (procedural memory) or only mildly affected (semantic memory).

Amnesia is characterised by omissions, intrusions, and, less frequently, provoked confabulations, due to memory inaccessibility, increased sensitivity to interference or monitoring failure. Awareness of memory deficits may be absent.

Label. The term Global Amnesia does not refer to severity, it was introduced to refer to combined verbal and non-verbal memory disorder. The term Pure Amnesia identifies absence of associated cognitive impairments and affects both recall and recognition.

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