

Neuropsychological Impairment in Major Depressive Disorder

Rodrigo Aguirre-Baez*

Psychological Studies Institute, Medicine Faculty, Austral University of Chile, Valdivia, Chile

***Corresponding Author:** Rodrigo Aguirre-Baez, Psychological Studies Institute, Medicine Faculty, Austral University of Chile, Valdivia, Chile.

Received: April 03, 2019; **Published:** May 27, 2019

Major depressive disorder (MDD) is the main disorder of mood and one of the pathologies in mental health with greater prevalence worldwide, being located, according to the World Health Organization, in a range between 5 - 10% of the population [1]. Neurological and psychiatric diseases, such as depression, tend to frequently manifest cognitive impairment, which are one of the main consequences of these diseases [2].

The cognitive alterations can intensify the depressive symptomatology, directly collaborating with the severity of the disease, as well as the affectation in the activities of the daily life [3]. Based on this, neuropsychology -in charge of understanding cognitive phenomena in healthy and pathological population- would contribute to the establishment of evaluation and intervention plans that support the treatment of many pathologies in mental health, including mood disorders.

The researches account for this cognitive impairment in depressive patients, where the Attentional processes (attentional control, sustained and focal attention) [4], Verbal Memory (including verbal learning) and Non-Verbal (visual memory among others) [5] and the Executive Functions (cognitive inhibition, problem solving, decision making, working memory and cognitive flexibility) [6] are the most committed. This cognitive deterioration is associated with psychosocial dysfunction, low self-esteem, poor insight ability that directly affect, not only in the functional aspect of patients, but also to be more reluctant to participate in interviews and interventions, reinforcing poor adherence to treatment and with that leading to decrease the effectiveness of the treatments provided, with the economic and social cost that this entails.

Cognitive dysfunction in MDD is associated with poor clinical outcomes and deterioration of psychosocial functioning [3], however, most treatments for MDD do not include specific interventions to treat cognitive impairment, where memory, executive function and attention deficits tend to persist even after the recovery of the mood symptomatology. Given the above, there is the importance of generating new intervention strategies, involving stimulation and/or cognitive rehabilitation programs, not only in order to improve their cognitive performance, but also to increase the effectiveness of the MDD interventions.

Bibliography

1. World Health Organization. "Depression and Other Common Mental Disorders, Global Health Estimates". World Health Organization (2017): 5-12.
2. Pérez C and Vásquez C. "Contribución de la neuropsicología al diagnóstico de enfermedades neuropsiquiátricas". *Revista Médica Clínica Las Condes* 23.5 (2012): 530-541.
3. Accortt EE., et al. "Women and major depressive disorder: clinical perspectives on causal pathways". *Journal of Women's Health* 17.10 (2008): 1583-1590.
4. Rock P., et al. "Cognitive impairment in depression: a systematic review and meta-analysis". *Psychological Medicine* 44.10 (2013): 2029-2040.

5. Bora E., *et al.* "Cognitive impairment in euthymic major depressive disorder: a meta-analysis". *Psychological Medicine* 43.10 (2013): 2017-2026.
6. Snyder HR. "Major depressive disorder is associated with broad impairments on neuropsychological measures of executive function: a meta-analysis and review". *Psychological Bulletin* 139.1 (2013): 81-132.

Volume 11 Issue 6 June 2019

©All rights reserved by Rodrigo Aguirre-Baez.