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Sense of identity in advanced Alzheimer's dementia: A cognitive dissociation between sameness and selfhood?



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ABSTRACT

We looked at whether sense of identity persists in patients with Alzheimer's disease (AD) and if its profile remains the same between two examinations. A specifically designed protocol was administered to 16 AD patients in the mild to severe stages of dementia and to 16 matched healthy controls, both living in the same institution. We showed that sense of identity was broadly preserved in AD patients. The patterns of their responses were similar to those of controls, and remained consistent over a two-week period. However, some qualitative characteristics of sense of identity in AD patients differed significantly from those of controls, suggesting that AD patients may not be able to update their self-knowledge, probably because of their episodic memory deficit. These results are discussed in the light of both current models of the self and philosophical concepts such as sameness and selfhood.

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1. Introduction

According to the philosopher Husserl (1913/1950), the self is a spectator of itself and of the world. The self requires sustenance from others and from its environment to develop itself and continue to flourish over time. It also feeds on what it sees about itself, what it remembers and what it chooses to remember (Husserl, 1893–1917/2003). Trying to give a complete definition of the self is problematic and may lead to divergent theories, because the self is multifaceted itself, being a function of time, of others and concurrently remaining the same, as it can also be defined as the permanent conservation of oneself. In his conception of the self, the philosopher Ricoeur (1990) emphasizes the constant updating of the Self, contesting Locke's vision of a permanent self (1689/2001). Thus one could characterize oneself in two different ways: by referring either to the core (and basic) aspects of oneself or to the more labile ones. These to manners to describe oneself echo philosophical concepts of sameness and selfhood, referring respectively to the fact of feeling the same, no matter one's own social status, period of life or health issues, and the fact of being in a permanent alteration, thus being somebody precise on this very moment and different from who one was yesterday. Therefore there could be two types of "self", one, more general, core and constant and the other modulated by time and different experiences. Just as time seems to be a fundamental concept for trying to grasp the essence of the self, so memory can be regarded as a bridge leading to its understanding. Although

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the self is more than memory, in the past few years a growing number of researchers have viewed autobiographical memory as a means of capturing the nature and functioning of the self.

In psychology, the self is viewed as a complex multi-dimensional construct with a structural level of self-representation in memory (Kihlstrom, Beer, & Klein, 2002) and a set of self-related functional processes required to evoke self-representations (Morin, 2006; Stuss, Gallup, & Alexander, 2001). Self-representations, which give rise to the sense of identity, consist of personal information, stored in either semantic or episodic autobiographical memory (Klein, 2010). Semantic self-representations include not only general knowledge of personal significance (e.g., "I was born in Paris") and semantic autobiographical memories (e.g., "When I was young, I used to go on holiday in Brittany"), but also abstract trait self-knowledge (e.g., "I am an ambitious person") and knowledge about more private (covert) aspects of oneself, such as internal attributes (e.g., "I pay close attention to my feelings"). Trait self-knowledge defines our identity and personality (Haslam, Jetten, Haslam, Pugliese, & Tonks, 2011; Klein, Loftus, & Kihlstrom, 1996). Trait self-knowledge can be broken down into a number of different domains, including physical, psychological, and social, etc. (Byrne, 1996; Fitts & Warren, 1996). Contrary to semantic self-representations (e.g. "I am helpful"), episodic self-representations consist of more concrete and specific items of personal information referring to a specific spatial and temporal context (e.g., "Yesterday at the supermarket, I helped someone pick up her shopping after her bag broke") (Conway, 2009; Piolino, Desgranges, & Eustache, 2009; Tulving, 2002).

If autobiographical memory is indeed crucial to the construction of the sense of identity and the feeling of self-continuity (Conway, 2005), what happens to sense of identity in patients suffering from severe episodic memory disorders and who are thus unable to relive personal events with "warmth and intimacy", to quote William James (1890)? Patient KC, who suffered from severe amnesia, was unable to remember any specific, personally colored life experiences, but had relatively well preserved semantic autobiographical memory (Tulving, 1993). KC also underwent a profound change of personality but, interestingly, possessed "reasonably realistic trait self-knowledge", corresponding to his present self, indicating that he had acquired new trait self-knowledge. Furthermore, this study and others (see Klein & Lax, 2010, for a review) suggest that even when episodic self-representations are lost in dense amnesic syndromes, sense of identity can still survive on semantic self-representations. Determining the integrity of sense of identity is extremely worthwhile both at the theoretical level and in terms of patient care (see Caddell & Clare, 2011a, for a review of the interventions supporting self in dementia). However, it is particularly hard to accomplish in Alzheimer's dementia, which is characterized by particularly severe disorders of episodic memory from the onset of the disease, as well as by semantic memory disturbance that can be significant by the time the patient has reached the moderate stage. Indeed, it is legitimate to wonder whether the residual semantic memory is sufficient to ensure the persistence of sense of identity in these patients.

Studies devoted to the self in dementia have used both qualitative and quantitative measures and have been founded on a variety of theories (see Caddell & Clare, 2010, for a review). Qualitative approaches based on analyses of verbal interactions involving patients have mainly explored the self as a unitary construct in the context of different models such as the social constructionist model (Sabat & Collins, 1999) or interactionist models of self. On the contrary, quantitative approaches have been designed to measure a specific component of the self such as self-knowledge (Gil et al., 2001), role identities (Cohen-Mansfield, Golander, & Arnheim, 2000), self-recognition (Hehman, German, & Klein, 2005) and the identity component of the self-concept (Addis & Tippett, 2004). Studies of the self in Alzheimer's disease (AD) are scarce and the methodologies used vary widely. There is a genuine debate between scientists on this subject not yet sufficiently explored according to Caddell and Clare (2010). Some claim that the self disintegrates as the disease progresses, whereas others argue that it persists, at least in a partial form. Davis (2004), for instance, talked about the "dismantling of the self" and the "dissolution of personality", and hypothesized the progressive and complete loss of self with the advancement of dementia. By contrast, Fazio and Mitchell (2009) investigated the persistence of self in people with AD via visual self-recognition using photographs. These authors showed that, even though they had no memory of a photographic session they had undergone only minutes earlier, all the participants with mild impairment and most of those with moderate impairment were able to identify the person in the photograph that had just been taken as themselves, consistent with a relatively well preserved self. The same conclusion was reached in the other part of the study, which examined the use of personal pronouns and attributes elicited in a semistructured interview: when the rate of production was considered, the mean numbers of pronouns and attributes produced per minute were very similar for AD patients and for controls. Caddell and Clare (2013) reported that AD patients in the mild stage of the disease felt that little had changed considering their identities as a whole, even if most features they identified about themselves were different from those that characterized them prior to the onset of the disease. Most researchers are supporters of an in-between thesis. For instance, Hehman et al. (2005) asked Patient PH, who was in the severe stage of Alzheimer's dementia, scoring 7 on the Mini-Mental State Examination (MMSE; Folstein, Folstein, & McHugh, 1975), to identify herself in a series of pictures from each decade of her life, representing her in her 20s, 30s, 40s, 50s, 60s, 70s, and 80s. PH was able to recognize herself in photographs taken during her early life, but not in pictures taken during the last decades of her life. According to the authors, this suggested that PH's failure to update her semantic self-knowledge could be ascribed to a temporally graded breakdown in semantic memory. Fargeau et al. (2010) examined three domains of self in line with James' conception and found that in AD the social self (recognition of others and understanding of the way others look at oneself) is more vulnerable than the material self (recognition of one's own body) and the spiritual self (values and philosophy of life). Fargeau et al. (2010) deemed the self to be affected when the main caregiver reported behavioral changes (compared with the premorbid status) in response to a proxy questionnaire. The majority of patients proved to be impaired in at least one domain of self, and when only one domain was affected, it was always the social self. In addition, autobiographical memory was more severely affected in patients who were impaired in all three self-domains than in those who were impaired in only

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