TNET and neuropsychological measures, including episodic and semantic memory tests.
Results: NCI adults demonstrated better memory than CI participants for TNET items. The NCI and CI groups did not differ regarding memory for remote items; however, CI participants had worse memory for recent items. There was a significant association between TNET performance and capacity for episodic and semantic memory in people with CI. In the NCI group, the TNET was associated only with episodic memory.
Conclusions: Findings support the use of news events to assess remote memories in older adults. Novel remote memory measures broaden the scope of memory assessment far beyond what is feasible within traditional neuropsychological assessment and provide insight into the onset of memory changes. Results enhance understanding of memory decline in older adults with cognitive impairment.

Categories: Memory Functions/Amnesia
Keyword 1: amnesia

3 Towards Detecting a Pre-clinical Signature of Dementia: Accelerated Forgetting in Healthy Older Samples - Implications for Methodology, Future Ageing Studies and Early Identification of Dementia

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Objective: Accelerated long-term forgetting (ALF) has been reported in healthy older individuals, and is a possible early marker for risk of developing Alzheimer's disease (AD). The Verbal Associative Learning & Memory Test (VALMT; McGibbon & Jansari, 2013) addresses methodological weaknesses in existing clinical tests and has detected ALF in epilepsy within an hour. We used VALMT to investigate learning and forgetting in healthy older participants.
Participants and Methods: Older (60-69yrs) and Younger (19-31yrs) participants were compared. Using VALMT, unrelated word-pairs were learned to criterion, then cued-recall was tested at delays of 5, 30 and 55 minutes. Unique pairs were tested at each delay. Subjective memory complaints data were gathered, and the Wechsler Memory Scale Logical Memory test (WMS-LM; a standard clinical measure) was administered.
Results: VALMT identified a significant difference in delayed recall between Younger and Older groups by 55 minutes (d = 1.32). While 'fast-learning' Older participants scored similarly to Younger participants, 'slow-learning' Older participants were impaired at all delays. Forgetting rates suggested degradation of memory starts during early synaptic consolidation rather than later system-level consolidation. Increased subjective memory complaints were associated with reduced VALMT scores. By contrast, WMS-LM failed to identify significant differences between any groups, and did not correlate with memory complaints.
Conclusions: We conclude VALMT may be better able than WMS-LM to identify subtle impairments in healthy older adults within a single clinical visit, and VALMT results better reflect subjective experience. Older slow-learners forget faster and report more subjective memory complaints, which may indicate a group at risk of developing AD.

Categories: Memory Functions/Amnesia
Keyword 1: amnesia

4 Accelerated Long-Term Forgetting in Patients with Cerebrovascular Disease

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Objective: Long-term forgetting rates may be more sensitive for detecting memory decrements compared to short-delay memory assessments (e.g., after 20-30 minutes). To date, much research has been performed on accelerated long-term forgetting (ALF) in epilepsy patients, but research in other patient groups is lacking. ALF may be promising in the field of cerebrovascular disease, as many of these patients experience cognitive complaints, yet do not show impaired performances on neuropsychological assessments.
Participants and Methods: Here, I will present empirical findings on ALF in individuals after a TIA/minor stroke (n=30) and after stroke (n=91) using short- (20-30 min) and long-delay (1-week) memory testing.

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