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Abstracts will be considered for both poster and platform presentations

Cognitive/Behavioral disorders

Clinical insight can be operationally defined as an individual being aware that they have an illness or affliction (Beck, 2004). Patients with clinical insight are aware that they have an illness, and they may even be amenable to treatment. Cognitive insight, on the other hand, allows one to take into account their current situation, adequately evaluate it, and possibly change their interpretations based on these factors (Beck 2004). It is often evaluated under the lens of two concepts: self-reflectiveness and self-certainty (Beck, 2004). These reflect an individual's ability to evaluate their current situation and change their perceptions with regard to their current reality. Cognitive insight is discussed in psychiatric research (particularly in patients diagnosed with psychosis), in addition to literature pertaining to Alzheimer's Disease and Frontotemporal Dementia (Van Camp, 2017). It has been indicated that patients with greater cognitive insight are often more compliant with treatment of their illness (Sui, 2015).

Clinical insight, or the lack thereof (anosognosia), has often been discussed at the clinical level within the stroke population. However, there is little research into cognitive insight with patients who have suffered CVAs. This includes patients who are aware they have had a stroke, are aware they may have lasting motor or sensory deficits, but are unable to appraise their new situation. It has been suggested that they may not be able to adapt to their new lifestyle or understand new functional limitations. This inability to appreciate clinical circumstances may contribute to poor adherence to treatment (e.g., rehabilitation), potentially having significant negative consequences on their clinical return to baseline.

Cognitive insight is a concept that is discussed clinically and colloquially, yet research into this is lacking in fields outside of psychiatry. Further research in this area is needed to clarify the components of this construct, which can in turn inform research to enhance our understanding of neurologic patients' capacity to possess and apply insight.