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Consent and awareness: mental conditions at diagnosis.

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Abstract

Informed consent is often talked about in an abstract manner, as if consent and information necessarily have to go together, and almost as if consent is "naturally" the quintessence of a good professional relationship in modern medicine. The United States is considered as the place of origin of informed consent. In Italy the concept of informed consent can be found for the first time in the 1990s. Informed consent is based on the principles of autonomy and benefit, on awareness and information. Already at the moment of the diagnosis, in addition to motor deficits, focal cognitive deficits are often present. It is important for the doctor to consider and evaluate the actual ability to comprehend and process the clinical situation on the part of the patient. At the Neuro-Oncology Division of the Carlo Besta Neurological Institute of Milan, we sought to analyse how and to what extent the brain tumour alters and conditions cognitive functionality, and hence the ability to process, comprehend and retain information during a diagnostic communication, and whether and how this moment is influenced by the presence of any global or specific cognitive deficits. Preliminary and performed on a numerically limited sample, 30 patients out of 42, in a specific neuropsychological survey, display cognitive attention and memory deficits despite achieving an adequate score on a global cognitive assessment. The physician's attention to the cognitive faculties of a patient to whom a pathological condition and a therapeutic approach are being presented is fundamental.

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