Behavioral/Cognitive

A Single-System Model Predicts Recognition Memory and Repetition Priming in Amnesia

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We challenge the claim that there are distinct neural systems for explicit and implicit memory by demonstrating that a formal single-system model predicts the pattern of recognition memory (explicit) and repetition priming (implicit) in amnesia. In the current investigation, human participants with amnesia categorized pictures of objects at study and then, at test, identified fragmented versions of studied (old) and nonstudied (new) objects (providing a measure of priming), and made a recognition memory judgment (old vs new) for each object. Numerous results in the amnesic patients were predicted in advance by the single-system model, as follows: (1) deficits in recognition memory and priming were evident relative to a control group; (2) items judged as old were identified at greater levels of fragmentation than items judged new, regardless of whether the items were actually old or new; and (3) the magnitude of the priming effect (the identification advantage for old vs new items) overall was greater than that of items judged new. Model evidence measures also favored the single-system model over two formal multiple-systems models. The findings support the single-system model, which explains the pattern of recognition and priming in amnesia primarily as a reduction in the strength of a single dimension of memory strength, rather than a selective explicit memory system deficit.

Key words: amnesia; computational model; long-term memory; memory systems; recognition memory; repetition priming

Introduction

One of the most influential distinctions in the cognitive neuroscience of memory is between explicit and implicit long-term memory. Explicit memory refers to conscious recollection of prior experiences. Implicit memory refers to changes in behavior that are due to prior experience, but are unaccompanied by conscious recollection of those experiences (Schacter, 1987). Implicit memory is commonly shown via repetition priming, which is a change or facilitation in identification, production, or detection of an item (e.g., a picture of an object) as a result of prior exposure to the same or a similar item. Strikingly, despite profound deficits in explicit memory tasks such as recognition—in which participants judge whether items have been presented before in a certain context—individuals with amnesia can show normal levels of repetition priming (Hamann and Squire, 1997). This dissociation is widely regarded as some of the strongest evidence for the proposal that functionally and neurally distinct explicit and implicit memory systems exist in the brain: recognition is driven by an explicit (declarative/conscious) memory system located in the medial temporal lobes (damaged in amnesia), whereas priming is driven by implicit (nondeclarative/unconscious) memory systems in modality-specific neocortical regions (Tulving and Schacter, 1990; Gabrieli, 1998; Squire, 2009). Of primary interest here is the proposal that recognition and priming are driven by distinct explicit and implicit memory sources (Squire, 2009).

An alternative perspective is that recognition and repetition priming are driven by the same memory system or source. This view has been formalized in a single-system (SS) model of recognition and priming (Berry et al., 2006, 2008a,b, 2010, 2012; Shanks and Berry, 2012). Surprisingly, this model can explain numerous results in healthy adults that on the surface appear to be indicative of multiple systems; it even predicts results that are not predicted by multiple-systems versions of the model and can provide better fits to the data (Berry et al., 2012).

Here we provide a critical test of the SS model by applying it to data from amnesia. We also compare its fit to two formal multiple-systems models. We test a relatively homogeneous and well characterized group of amnesic patients that is atypically large ($n = 24$; Hayes et al., 2012). The patients had Korsakoff’s syndrome (KS), a chronic disorder that is often caused by severe alcoholism and thiamine deficiency that results in diencephalic, frontal, and hippocampal brain damage (Le Berre et al., 2014). It is characterized by anterograde and retrograde amnesia (Kopelman et al., 2009; Fama et al., 2012; Kessels and Kopelman, 2012; Race and Verfaellie, 2012). Findings from patients with KS have
played a central role in the formulation of multiple-systems views (Hayes et al., 2012), and implicit memory is widely regarded to be preserved in KS (Kopelman et al., 2009; Oudman et al., 2011). In the current investigation, participants categorized pictures of familiar objects (e.g., an elephant) at study. In the test phase, participants identified fragmented versions of old (studied) and new objects (providing a measure of priming), and made a recognition memory judgment (old/new) after identifying each object.

Materials and Methods

Participants. Twenty-four patients (16 male; mean age, 50.2 years; SD, 7.7 years) with Korsakoff’s amnesia were recruited via the Korsakoff Clinic of the Vincent van Gogh Institute for Psychiatry, Venray, The Netherlands (KOR group). All patients fulfilled the criteria for alcohol-induced persisting amnestic disorder (American Psychiatric Association, 2000) and Korsakoff’s syndrome (Kopelman, 2002). The diagnoses were supported by the patients’ medical history and neuropsychological assessment, and all participants had anterograde amnesia, performing in the impaired range on the Rivermead Behavioral Memory Test (RBMT; Wilson et al., 1989; Van Balen et al., 1996; total profile score: mean score, 6.7; SD, 4.0 (scoring: 17–21, poor memory; 10–16, mildly impaired; 0–9, severely impaired)], as well as retrograde amnesia for their biographical history. Premorbid intelligence was estimated using the Dutch version of the National Adult Reading Test (NART; Schmand et al., 1991), with IQs in the below-average to average range, which was in agreement with the patients’ educational levels (mean NART-IQ score, 93.8; SD, 12.5; mean educational level, 3.9; SD, 1.1), where education level was assessed in seven categories based on the Dutch educational system, as follows: 1, primary school; 7, academic degree (Verhage, 1964). Neuroradiological findings (CT or MRI) showed abnormalities associated with KS, such as (diencephalic) atrophy or white-matter lesions (Pitel et al., 2012). No brain abnormalities were found that countered the clinical diagnosis (e.g., large strokes, tumors). All patients were abstinent from alcohol since their admittance to the clinic (>3 months before testing), none was in the acute Wernicke phase of the syndrome, and none fulfilled the criteria for alcohol-related dementia (Oslin et al., 1998).

The control (CON) group also consisted of 24 individuals, matched in terms of age (mean age, 50.2 years; SD, 13.6 years; t(46) = 0.59, p = 0.56), premorbid IQ (mean NART-IQ score, 96.4; SD, 12.6; t(46) = 0.72, p = 0.47), and the proportion of males and females. Exclusion criteria for the control subjects were a self-reported history of neurologic or psychiatric disorder, or subjective cognitive complaints. Level of education (mean NART-IQ score, 93.8; SD, 12.5; mean educational level, 3.9; SD, 1.1), where education level was assessed in seven categories based on the Dutch educational system, as follows: 1, primary school; 7, academic degree (Verhage, 1964). Neuroradiological findings (CT or MRI) showed abnormalities associated with KS, such as (diencephalic) atrophy or white-matter lesions (Pitel et al., 2012). No brain abnormalities were found that countered the clinical diagnosis (e.g., large strokes, tumors). All patients were abstinent from alcohol since their admittance to the clinic (>3 months before testing), none was in the acute Wernicke phase of the syndrome, and none fulfilled the criteria for alcohol-related dementia (Oslin et al., 1998).

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Materials. The stimuli were 80 color photographs of familiar objects (e.g., a bicycle, a guitar). All stimuli were presented on a computer monitor against a white background. Each object subtended ~7.5° of visual angle in the horizontal and vertical. Stimuli were arranged into two 40-item lists. Each list acted as the studied or new stimuli equally often across participants. Approximately half of the objects in each list were larger than a shoebox. All instructions were presented in Dutch.

Procedure. During the study phase, participants were told that they would be presented with pictures of objects and that they must decide whether each object was smaller or larger in size than a shoebox, indicating their response with a button press. The sequence of events on each trial was as follows: (1) a central fixation point (“+”) was presented for 2000 ms; (2) the object was then presented for 2000 ms; and (3) if a response had been made, the next trial then commenced, and if a response had not been made, a blank screen was presented until a response was made. For the duration of the study phase, the reminder cue “Is the object smaller or larger than a shoebox? Z = smaller, M = larger” remained visible toward the bottom of the screen. The order of presentation of items was randomly determined for each participant. There was a short (maximum time, 5 min) retention interval before the test phase commenced, during which standardized tests (e.g., NART) were administered.

A continuous identification with recognition (CID-R; Stark and McClelland, 2000) procedure was used to present each item at test. On each trial, an item was initially presented at a highly fragmented level (level 1). Participants were instructed to try to identify the item at the most fragmented level they could. If the item could not be identified, a button press revealed a less fragmented version of the object (up to level 10).
The greater reliability of the recognition task is consistent with the notion and priming measures was calculated using split-half correlations. In the SS model, the recognition performance was measured with \( r, p, \) and \( e \) are combined with task-specific sources of noise \( (\epsilon_e \text{ and } \epsilon_p) \) to produce the recognition judgment (i.e., \( J_r = f_r + e \)) and priming measure (i.e., \( J_p = b - s_f + e_p \)). Importantly, however, \( f_r \) and \( f_p \) are uncorrelated (i.e., \( r(f_r, f_p) = 0 \)), and the mean explicit strength of old items \( (\mu_{\text{old}}) \) can vary independently of the mean implicit strength of old items \( (\mu_{\text{old}}) \) across individuals/conditions. This allows the model to produce dissociations at the level of individual items (e.g., stochastic independence; Tulving et al., 1982; Pollack, 1996) and also at the level of group/condition (e.g., independent effects of a variable upon recognition and priming, such as the dissociation in amnesia). Thus, this model represents a relatively strong interpretation of the idea that explicit and implicit memory systems are independent (Tulving et al., 1982).

Another model, the MS2 model, represents a weaker interpretation of the idea that there is independence between systems (Berry et al., 2012). This model is identical to the MS1 model except that the explicit and implicit strengths of individual items may be positively correlated (with correlation \( w \)). A correlation could arise, for example, via distinctiveness: a more distinctive item may be better encoded into both the explicit and implicit memory systems. This gives the MS2 model greater flexibility, allowing it to reproduce associations between recognition and priming measures at the level of individual items (like the SS model). In fact, the MS2 model subsumes the SS and MS1 models as special cases of it, and the MS2 model can therefore, in principle, produce any result that the SS and MS1 models can achieve (Berry et al., 2012). When the correlation between \( f_r \) and \( f_p \) is 1 (i.e., \( r(f_r, f_p) = 1 \)), and the mean \( f_r \) and \( f_p \) values of old items are equal (i.e., \( \mu_{\text{old}} = \mu_{\text{old},r} = \mu_{\text{old},p} \)), the model reduces to the SS model; when the correlation between \( f_r \) and \( f_p \) is zero (i.e., \( r(f_r, f_p) = 0 \)), the model reduces to the MS1 model (Berry et al., 2012). Model fitting. Models were fit using maximum likelihood estimation (full details are given in Berry et al., 2012). The likelihood of each identification level (ID) and judgment (J) combination is given by the following function:

\[
L(Z, ID, J) = \phi(ID)(b - s_f + \mu_{\text{old}}) \times \Phi(C_J|\mu_{\text{old},r}, \sigma_{\text{old},r}) - \Phi(C_J|\mu_{\text{old},p}, \sigma_{\text{old},p}) \times \phi(ID)b - s_f + \mu_{\text{old}})
\]

where \( X = \text{old, new}; \Phi \) is the cumulative normal distribution function; \( \Phi \) is the normal density function; \( \sigma_{\text{old}} = \sigma_r + \sigma_p; \mu_{\text{old},r} \) and \( \sigma_{\text{old},r} \) are the mean and variance of the conditional distribution of \( J_r \) given \( ID, j \) is 1 when \( Z = \) “new” (N) and \( j = 2 \) when \( Z = \) “old” (O); \( C_L = C_r = 0, C_f = \mu_{\text{old},r} \times \sigma_{\text{old},r} \) are calculated as follows:

\[
\mu_{\text{old},r} = \mu_r - \frac{ws_e J_f}{s_{\sigma^2} + \sigma_r^2}
\]

and

\[
\sigma_{\text{old},r}^2 = \sigma_r^2 + \sigma_p^2 - \frac{ws_e J_f}{s_{\sigma^2} + \sigma_r^2 + \sigma_p^2}
\]

where \( \mu_{\text{old},r} = 0 \) when \( X = \text{new}, \mu_{\text{old},p} = 0 \) when \( X = \text{old}; \mu_{\text{old},r} = 0 \) when \( X = \text{new}, \mu_{\text{old},p} = 0 \) when \( X = \text{old}. \) In the SS model, \( \mu_{\text{old}} = \mu_r \) and \( \sigma_{\text{old}}^2 = \sigma_r^2 + \sigma_p^2 \), where \( \sigma_r^2 = \text{var} J_f \) and \( \sigma_p^2 = \text{var} J_f \). Note that this model is not intended to be a complete model for the data, but rather a general framework for modeling recognition and priming in amnesia.
Given the best-fitting parameter values for a model, the expected model results can be calculated analytically as follows: $P(\text{hit}) = 1 - \Phi(C - \mu_{\text{old}}); P(\text{false alarm}) = 1 - \Phi(C_r); d' = \mu_{\text{old}} - E(\text{ID}[\text{new}]) = b; E(\text{ID}[\text{old}]) = b - \mu_{\text{old}}; \text{priming effect} = \mu_{\text{old}}$

The expected values of ID conditional on judgment $Z$ are given by the following function:

$$E(\text{ID}[Z,X]) = b - \mu_{\text{old}} + \frac{s}{\sqrt{\sigma_{\text{old}}^2 + \sigma_r^2}} \left( \frac{\Phi(C - \mu_{\text{old}})}{\sigma_r} - \frac{\Phi(C_r - \mu_{\text{old}})}{\sigma_r} \right)$$

where $\sigma_r = \sqrt{\sigma_r^2 + \sigma_c^2}$; $j = 1$ when $Z = N$; and $j = 2$ when $Z = O$; $C_0 = -\infty; C_1 = C_j; \text{and } C_2 = \infty$. Thus, the equation gives the expected ID of hits ($E(\text{ID}[H])$) when $X = \text{old}$ and $Z = O$; it gives the expected ID of false alarms ($E(\text{ID}[F])$) when $X = \text{new}$ and $Z = O$. Similarly, the equation gives the expected ID of misses ($E(\text{ID}[M])$) when $X = \text{old}$ and $Z = N$; and it gives the expected ID of correct rejections ($E(\text{ID}[CR])$) when $X = \text{new}$ and $Z = N$.

In the data, because the mean ID for items judged old/new are weighted means, the expected ID for items judged old/new are given by the weighted expected IDs to hits and false alarms (items judged old), or misses and correct rejections (items judged old), hence:

$$E(\text{ID}[Z = O]) = \frac{P(\text{H})E(\text{ID}[H]) + P(\text{F})E(\text{ID}[F])}{P(\text{H}) + P(\text{F})},$$

and

$$E(\text{ID}[Z = N]) = \frac{[1 - P(\text{H})E(\text{ID}[M]) + [1 - P(\text{F})E(\text{ID}[CR])]}{2 - P(\text{H}) - P(\text{F})}.$$
lated ID values were then rounded to the nearest integer; if the value was <1 or >10, then it was rounded to 1 or 10, respectively, thereby producing discretized ID data. The simulated ID and judgment data were then fit by the models as described above, and the estimates of the free parameters were compared with the values of the parameters that were originally used to simulate the data (i.e., the true parameter values). For all models, the estimated parameter values matched the true parameter values. This demonstrates that the parameters of the models can still be recovered, even though the ID data are discrete.

Another issue concerns the function used to relate $f_o$ to ID level. The amount of a test picture revealed across levels varies by an exponential function, whereas the equation relating ID level to $f_o$ in the models is linear. It is possible that an alternative function relating ID to $f_o$ would provide a more complete characterization of the ID data and improve the performance of all of the models. However, most important for current purposes is that ID is modeled as a monotonically decreasing function of performance of all of the models. However, for current purposes it is that ID is modeled as a monotonically decreasing function of $f_o$ in all models. We chose to model the ID variable in this way for consistency with previous applications of the models, and for ease of model specification.

Model predictions. Three key predictions are made by the SS model. These predictions follow from the assumption that greater values of $f_o$ tend to lead to a greater likelihood of an old judgment and also better performance in the priming task (i.e., greater values of $J_f$ and lower values of ID; Fig. 2). Prediction 1 is that, given a deficit in recognition in amnestic individuals, a deficit in priming should also be evident. This is because changes in $\mu_{old}$ will tend to affect overall levels of both recognition and priming. However, the effect on priming can be smaller in magnitude than for recognition because of the greater variance of the noise associated with the priming task that is typically assumed (Berry et al., 2006). The MS1 and MS2 models can reproduce any pattern of recognition and priming, and so do not make this prediction in advance.

Predictions 2 and 3 concern performance in the priming task when broken down by recognition response (Fig. 2). Prediction 2 is that, within old and new items, items that are judged old are likely to be identified at greater levels of fragmentation than items judged new (this is often referred to as a "fluency effect"; Conroy et al., 2005); items with values of $J_f$ that exceed the criterion $C$ are judged old and tend to have larger $f_o$ values than items judged new. Because the same $f_o$ value drives identification, items judged old will tend to be identified at more fragmented levels. Prediction 3 concerns the priming effect for items judged new. This effect has been reported in numerous studies, and on the surface appears to indicate that recognition and priming have distinct memorial bases since priming occurs in the absence of overt recognition (Berry et al., 2008a). The SS model predicts that the magnitude of the priming effect (i.e., the identification advantage of all old items relative to new items) will be greater than the priming effect within the subset of items judged new (i.e., the identification advantage for old items judged new relative to new items judged new). This is because values of $J_f$ tend to be greater for old items than new items, even within the subset of items judged new. However, the difference in $J_f$ between old and new items is greater than the difference in $J_f$ between old and new items within the subset of items judged new (Fig. 2). Because differences in $J_f$ tend to reflect differences in $f_o$, the priming effect across all items will tend to be greater than the priming effect within the subset of items judged new. (Though differences in $J_f$ do not reflect differences in $f_o$, as is the case, for example, with false-alarm and miss responses; Berry et al., 2008a.) Predictions 2 and 3 are not made by the MS1 model because ID and $J_f$ are uncorrelated within item type (Fig. 2). The MS2 model can produce the same results as the SS model with regard to Predictions 2 and 3, but the greater flexibility of this model means that it does not make these predictions in advance.

Results

SS model prediction 1

Recognition memory was significantly lower in the KOR group ($n = 24$) than in the CON group ($n = 24$; Figs. 3a, 4a): $P_o, t_{(46)} = 9.31, p < 0.001$ (Cohen’s $d = 2.69$); $d', t_{(46)} = 8.21, p < 0.001$ (KOR group, $d' = 1.00$; SE, 0.17; CON group, $d' = 2.64$; SE, 0.11), consistent with the memory disorder in these individuals. Recognition was reliably greater than chance (i.e., $d' > P_c = 0.5$) in both groups ($t$ values >5.31, $d$ values >1.08), and there was no significant difference in $C$ between the groups ($t_{(46)} = 1.23, p = 0.23, d = 0.36$; mean $C$: KOR group, 0.50; SE, 0.21; CON group, 0.23; SE, 0.08).
Primming was calculated as the mean identification level for new items minus the mean identification level for old items. Both groups showed reliable levels of priming: KOR group: mean, 0.35; SE, 0.11; $t_{(23)} = 3.18$, $p = 0.004$, $d = 0.65$; CON group: mean, 0.68; SE, 0.14; $t_{(23)} = 4.78$, $p < 0.001$, $d = 0.98$ (Figs. 3b, 4a). Crucially, primming was significantly lower in the KOR group than in the CON group ($t_{(46)} = 1.84; p = 0.036$, one-tailed; $d = 0.53$), as predicted by the SS model. Furthermore, there was
no significant difference in the mean identification level for new items across groups (Fig. 3b; \( t_{46} = 0.74, p = 0.47, d = 0.21 \)), which indicated that any difference in priming across groups could not be attributed to differences in baseline levels of performance in the task. Identifications were made at all possible fragmentation levels (range, 1–10 in both groups; interquartile range: KOR group, 5–8; CON group, 4–8).

**SS model predictions 2 and 3**

To test Predictions 2 and 3, the identification level of each item during testing was analyzed according to the following four possible recognition responses: a correct rejection is a new judgment to a new item; a false alarm is an old judgment to a new item; a miss is a new judgment to an old item; and a hit is an old judgment to an old item (Fig. 3c). A subset of participants made no responses in at least one of the four response categories, and so they were not included in the following analyses. There were five participants from the CON group: one had a hit rate of 1; and four had a false alarm rate of 0. Nine participants were also excluded from the KOR group on this basis: one had a hit rate of 1; one had a false alarm rate of 1; and seven had a false alarm rate of 0. The priming scores in the excluded participants were slightly
higher than in the full set of participants (KOR group: mean, 0.45; CON group: mean, 0.89). In the CON group, the excluded participants tended to have slightly higher recognition scores ($d' = 3.17, P = 0.82$); however, in the KOR group, the recognition scores were similar to the pre-exclusion group mean ($d' = 1.07, P = 0.17$). The excluded KOR participants did not appreciably differ from the pre-exclusion KOR group in terms of age (mean age, 49.33 years), NART-IQ score (mean score, 89.00), RBMT (mean score, 6.22), or education level (mean level, 4.11). Listwise deletion of these participants did not result in any qualitative changes in the recognition and priming differences reported, with the exception that the difference in the priming effects between the groups was only marginal ($t_{(32)} = 1.51, P = 0.07, d = 0.53$, one-tailed; KOR group: mean, 0.30; SE, 0.14; CON group: mean, 0.64; SE, 0.16); thus, there is need for a little caution in the claim of a deficit in priming in this KOR group. However, the priming effect in the KOR group subset ($d = 0.52$) was still smaller than that of the CON group ($d = 0.90$), and was only marginally significantly different from chance ($t_{(14)} = 2.09, p = 0.055$), which is, at least, still consistent with a deficit.

As predicted by the SS model (Prediction 2), in the KOR group, mean identification levels for items judged old were lower than those of items judged new within new and old items: ID(correct rejection) versus ID(false alarm): $t_{(14)} = 3.04, P = 0.009, d = 0.42$; ID(miss) vs ID(hit): $t_{(14)} = 3.98, P = 0.001, d = 0.74$ (Fig. 4b). Furthermore, as predicted by the SS model (Prediction 3), the magnitude of the priming effect for items judged new (calculated as $d = d_{correct} - d_{miss}$) was significantly lower than the priming effect for items judged new in the KOR group ($t_{(14)} = 2.51, P = 0.025, d = 0.51$). However, the priming effect for items judged new was not reliable in this group ($t_{(14)} = 0.083, P = 0.94, d = 0.02$). Similar trends regarding Predictions 2 and 3 were evident in the CON group; however, these were not reliable (Fig. 4b): Prediction 2: $d = d_{correct} - d_{false alarm}, t_{(18)} = 1.50, P = 0.15, d = 0.23$; ID(miss) vs ID(hit), $t_{(18)} = 1.29, P = 0.21, d = 0.15$; Prediction 3: $t_{(18)} = 1.18, P = 0.25, d = 0.28$. The priming effect for items judged new was, however, reliable in the CON group ($t_{(18)} = 2.89, P = 0.01, d = 0.29$). A 2 (item type: old, new) × 2 (judgment: old, new) × 2 (group: CON, KOR) ANOVA was also conducted on the identification levels. There was a significant main effect of judgment, $F_{(1,32)} = 21.23, P < 0.001, \eta^2_p = 0.40$, indicating that identification levels tended to be lower for items judged old versus new. No other main effects or interactions were significant (main effect of item type: $F_{(1,32)} = 3.28, P = 0.08$; all other $F$ values <2.33, $p$ values >0.137, $\eta^2_p$ values <0.09).

### Model fits

Table 2 shows the fit of the models to the data, and Table 1 shows the best-fitting parameter estimates of the SS, MS1, and MS2 models. When fit to the data aggregated across participants, the SS model provided the best fit to the CON group (indicated by the lowest AIC value in Table 2), but the MS2 model provided the best fit to the KOR group. However, the differences in AIC between the SS and MS2 models are very small (a difference of 1.2 for the CON group, and 0.3 for the KOR group), indicating that both models fit the data almost as well as each other (Burnham and Anderson, 2002). Furthermore, as shown in Table 1, the best-fitting value of $w$ in the MS2 model was equal to 1, and the values of $\mu_{old}$ and $\mu_{old}$ were also very similar within groups, suggesting that the MS2 model fits the data best when it behaves more like the SS model. When the models were fit to each individual, the SS model provided the best fit to both groups (Table 2), and the AIC was substantially smaller for the SS model compared with the MS1 and MS2 models (i.e., >10), indicating substantial support for the SS model (Burnham and Anderson, 2002). The majority of participants...
not incompatible with the SS model (Figs. 6, 7, patients A–C). Patient A was female, 51 years of age, with a NART-IQ score of 109, an RBMT score of 4, and an education level of 5; patient B was male, 54 years of age, with a NART-IQ score of 101, an RBMT score of 2, and an education level of 5; and patient C was male, 59 years of age, with a NART-IQ score of 87, an RBMT score of 12, and an education level of 2.

Patients B and C were best fit by the MS1 model, and patient A by the SS model (though the differences in AIC between the best-fitting models were small—<4). The mean priming effect in this subgroup was 0.59 (SE, 0.20), which is lower than the priming effect shown in the CON group (mean, 0.68; SE, 0.14), but still within the 95% confidence interval of the CON group mean (Fig. 4). From Figure 7, a and b, it is evident that the MS1 and MS2 models closely fit the recognition and priming results, whereas the SS model predicts a small amount of recognition in these patients, and a lower magnitude of priming than was evident in these individuals. From Figure 7, b and c, it is evident that (1) priming in patient A, but not patients in B and C, was below the lower 95% confidence interval of mean priming in the CON group; (2) all patients showed a fluency effect within old items, and patients A and C, but not patient B, showed a fluency effect within new items; and (3) patients A and B, but not patient C, showed a greater priming effect than the priming effect for items judged new. Thus, results 2 and 3, and to a lesser extent result 1, are largely compatible with the predictions of the SS model (and also the MS2 model). It is noteworthy that the SS model is able to reproduce a substantial priming effect in patient B despite very low recognition.

Discussion
Contrary to longstanding views that recognition memory and repetition priming are driven by distinct memory systems (Squire, 2009), this study showed that numerous results in amnesic patients could be predicted in advance by a single-system model: (1) reliable deficits in recognition and priming were found relative to the control subjects; (2) items judged old were identified at greater levels of fragmentation than items judged new within both old and new items; and (3) the magnitude of the priming effect overall was greater than the priming effect for items judged new (though note that priming for items judged new was not reliable in the KOR group). Findings 2 and 3 were not predicted by the MS1 model, but were reproduced by the MS2 model. The AIC and BIC model evidence measures, however, indicated that there was greater support for the SS model than the MS2 model. Thus, overall, the data from the amnesic patients favored the SS model over the MS1 and MS2 models.
Findings 2 and 3 are therefore in agreement with a previous study that found similar results in normal adults (Berry et al., 2012).

The deficit in priming found in the KOR group in this study contrasts with the widely held view that priming is preserved in amnesia. Although priming is frequently found to be preserved in amnesia (Gabrieli, 1998), many studies, like ours, have also reported deficits (Warrington and Weiskrantz, 1968; Cermak et al., 1993; Verfaellie et al., 1996; Ostergaard, 1999; Verfaellie and Cermak, 1999; Meier et al., 2009). When Korsakoff patients are specifically considered, priming deficits are often reported when the priming task is picture fragment completion (Hayes et al., 2012). There are different interpretations of such priming deficits. In KS, one account is that they reflect visuoperceptual impairments (Hayes et al., 2012). However, such an account does not appear to explain the priming deficit found in this study because baseline levels of identification (fragment identification levels for new items) did not differ between the KOR and CON groups, suggesting that the visuoperceptual abilities of the groups were appropriately matched.

One possible multiple-systems interpretation of the deficit in priming is that priming is greater in the CON group because these individuals use their greater capacity for explicit memory to retrieve studied items from memory during the identification portion of a trial; doing so increases the magnitude of priming relative to the amnesic patients (Squire et al., 1985). Although possible, there is evidence to suggest that such an account is unlikely to apply to our data. For example, this type of explicit contamination of fragment identification performance is deemed more likely to occur (and be more effective) when participants identify fragments at both study and test. Under these conditions, an association between the fragment and the picture name can be formed during the study phase and then be recalled during the test phase (Verfaellie et al., 1996). In our study, however, participants only identified fragments during the test phase, so there was no opportunity for specific fragment–picture name associations to be formed during the study phase. Moreover, in experiments using a CID-R task with normal adults, it has been found that even under conditions that appear optimal for using an explicit retrieval strategy in a CID-R task (i.e., informing the participant whether the upcoming trial will contain an old or new item), there was no evidence of greater priming than under typical testing conditions (Ward et al., 2013; for a similar finding, see also Brown et al., 1991; for a discussion of explicit contamination in a similar task, see also Ostergaard, 1998, 1999).

The SS model explains the deficits in the KOR group as arising from the weaker strength of a single underlying memory signal for studied items relative to the CON group. Interestingly, the effect of KS was larger on recognition than on priming (Cohen’s $d$: recognition, 2.69; priming, 0.53), and this was captured by the SS model (Cohen’s $d$: recognition, 2.27; priming, 0.51). The SS model is able to predict this interaction because there is not a 1:1 mapping between strength and performance; the signal is scaled differently and is subjected to different sources of noise for each task. That a single memory strength signal is expressed differently in two tasks in the SS model is conceptually similar to other models in which a single underlying memory trace is accessed in different ways depending upon the retrieval process (Greve et al., 2010). The difference in effect sizes predicted by the SS model is one possible explanation for why deficits are more frequently found in recognition than priming in amnesia. Consistent with this is the finding that priming tasks are typically less reliable than recognition tasks (Buschner and Wippich, 2000); indeed, the reliability of the recognition and priming tasks in our study tended to confirm this (see Materials and Methods).

In the CON group, numerical trends were found in support of Predictions 2 and 3, but these were not reliable. This is most likely due to low power: the number of misses and false alarms in the CON group was relatively low (CON group: median, 5 misses, 2 false alarms; KOR group: median, 16 misses, 11 false alarms), and so the variability in identification levels for these responses was relatively high (Fig. 3c). Clear evidence of Predictions 2 and 3 in normal adults has, however, been found across three experiments by Berry et al. (2012) with normal adults. They used a greater number of stimuli than this study (72–150 vs 40 old/new items), and overall levels of recognition were lower ($d'$ values <1.5 vs 2.64), which resulted in more false alarms and misses.

One potential concern with the CID-R task is that the identification portion of the trial may affect the recognition judgment. This may be deemed likely since recognition and priming trials are necessarily interleaved due to the nature of the task. Early dual-process theories of recognition proposed that perceptual fluency can act as one basis of recognition (Mandler, 1980; Jacoby and Dallas, 1981), and studies have shown that the probability of an old judgment to an item is greater if the rate at which it clarifies from a mask is fast rather than slow (Johnston et al., 1991). In
other words, a relatively fluent identification can be attributed to prior exposure. It is therefore possible that the relations between priming and recognition that we find are accentuated by the CID-R task. However, there is evidence from similar studies that have used blocked designs, which demonstrate that the within-item recognition–priming measure associations of the kind observed in this study are not dependent upon the interleaved nature of the CID-R task (Ostergaard, 1998; Sheldon and Moscovitch, 2010; see also discussion in Berry et al., 2012).

An important question is whether the SS model extends to other explicit tasks that are more reliant upon recollection (i.e., remembering prior context). Berry et al. (2012) found some evidence for this using a modified CID-R task with remember–know judgments (Tulving, 1985). Remember judgments are widely thought to measure a recollection memory process (Yonelinas, 2002). Berry et al. (2012) found that identification response times to items given remember judgments were faster than for those given know judgments (commonly thought to measure a familiarity process), and this was predicted by the SS model. In future research, it will be important to determine whether the model extends to other tasks that are reliant upon recollection such as source memory.

Finally, a remaining issue is whether the SS model can explain the kind of dissociation that is opposite to that reported in amnesia, namely, evidence of brain regions that support priming but not recognition. Although initial neuropsychological studies indicated that the right occipital lobe was such a region (Gabrieli et al., 1995), subsequent investigations have not corroborated this (Yonelinas et al., 2001; Kroll et al., 2003). Nevertheless, it is clear that regions outside the medial temporal lobe are involved in priming (and also recognition; Schacter et al., 2007), and one avenue for future research will be to determine how the activity of different regions maps onto the single strength signal in the SS model.

To conclude, the results from amnesic patients supported the predictions of the SS model. Numerous results were inconsistent with the MS1 model; this suggests that recognition and priming are not driven by completely independent explicit and implicit memory signals. Like the SS model, the MS2 model could account for the data. The MS2 model explains the deficits in recognition and priming in amnesia as reductions in the strength of both the explicit and implicit memory signals. There is also a substantial degree of association between the explicit and implicit memory strengths of a given item according to this model. The SS model, however, tended to be preferred according to model evidence measures and could predict the majority of results in amnesia in advance. Thus, the SS model appears to provide the most parsimonious account for the pattern of recognition and priming in amnesia found in this study.

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