

Commentary: What Happens to Subjects with Impaired Emotion Recognition Skills, and What To Do?

Dear Editor, we read with great interest the article by Albayrak et al¹ on “Emotion Recognition Skill in Specific Learning Disorder and Attention-Deficit Hyperactivity Disorder”. The researchers found that the concept of Emotion Recognition (ER), which might be one of the mechanisms associated with social and academic difficulties, is statistically similar to children affected by Attention-deficit Hyperactivity Disorder (ADHD) and Specific Learning Disorder (SLD). The present study showed that ER skills might be found in the consociated symptom cluster of 2 neurodevelopmental disorders such as ADHD and SLD, and it is one of the findings that can distinguish them from their healthy peers.

The article is fascinating because it allows us to reflect on what emotions are and what the difficulty of recognising them leads to. The question after reading the article is what happens to these children with an emotion recognition deficit.

Currently, the term emotion is often confused with ‘feeling’. In reality, there is a clear difference, which Damasio has explained.² Feeling means the emotion’s subjective experience, less intense and more lasting, originated in the brain. According to Ekman,³ emotions are reactions lasting a few seconds and are, therefore, different from affect, which lasts much longer.

Emotions are the meeting point between the body and the mind, which conveys the mental representation of reality. It is a function that originates from certain assumptions which determine a person’s emotional competence. In order of importance, the first assumption is the ability to recognise emotions. The individual who is aware of the feeling at the moment it arises pays attention to his internal states and can define them. From self-awareness, the capacity for self-control develops. Emotions stimulate the individual to action, prioritising goals. Each of us has a very personal way of reacting to events, also concerning personality and life experiences. Many studies emphasise the centrality of emotional communication, both verbally and through body gestures.

In psychiatry, interference with people’s ability to identify and manage their emotions can lead to an impairment of emotion regulation that has been shown to be a risk factor for several disorders and suicide risk.^{4,5} It has also been shown that not realising that one is feeling emotions leads people to engage in behaviours that are harmful to health, e.g., the abuse of cigarettes, alcohol or psychotropic drugs is attempting to keep tension or discomfort under control when one cannot otherwise relieve them.⁶

Emotional regulation is the sum of the ability to regulate one’s emotions, whether positive or negative, by dampening, intensifying or simply maintaining them, and of cognitive and behavioural processes that influence the occurrence, intensity, duration and expression of emotions.⁷

Emotional dysregulation is a series of dysfunctions in modulating the experience and expression of affect or reducing arousal: here, we see the amplification of sensitivity to emotional stimuli, the intensity of response, and the time required to return to baseline.⁸ In addition, it is associated with the inability to divert attention from emotional stimuli, dysfunction of information processing, urgency or insufficient control of suicidal or parasuicidal impulses based on negative emotions, and difficulty coordinating activities to pursue non-mood-oriented goals when experiencing negative emotions.⁹



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Cite this article as: De Berardis D, Fornaro M, Martinotti G, Di Giannantonio M. Commentary: What happens to subjects with impaired emotion recognition skills, and what to do? *Alpha Psychiatry*. 2022;23(6):274-275.



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The results of the study by Albayrak et al¹ point decisively towards evaluating, in all cases of ADHD and SLR, the ability to recognise emotions and how to intervene once this ability is moderately or severely impaired. This aspect is often neglected and underestimated in daily clinical practice in childhood and adulthood. In our opinion, on the contrary, it is a crucial point on which to work both in psychotherapy and with integrated interventions to prevent emotional dysregulation due to failure to identify emotions can cause. Thus, in the presence of an emotion recognition deficit, we must assume that the regulation of emotions is also impaired or compromised. This must lead us to the systematic evaluation of this ER ability precisely because the emotional dysregulation resulting from and linked to it can take many paths, including the development of suicidal ideation, the presence of substance uses as a dysfunctional coping strategy, and the chronicisation of the disorder itself towards forms that may then prove intractable or resistant to treatment.¹⁰ In essence, the study invites us to explore the ability of ER as early as possible to intervene in a targeted manner.

The data collected from the study by Albayrak et al¹ suggest promoting an intervention centred on increasing emotional awareness and emotional and behavioural regulation to counter possible chronicisation and aggressive acts.

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