

APHASIA

WHAT IS APHASIA?

Aphasia is a language disorder that results from a stroke, traumatic brain injury, tumor or other neurological condition. Aphasia affects all areas of language and communication, including speaking, understanding, reading, and writing. These areas can be affected in varying degrees. The symptoms of aphasia can be mild or very severe. Some individuals recover very rapidly and completely, while other patients may have permanent deficits and may need to use compensatory techniques/strategies to communicate effectively.

Aphasia does not result in a loss of intelligence. It is a deficit in receptive language (understanding what others say and what he/she reads) and/or expressive language (choosing/using words effectively in verbal or written forms). It is similar to being in a foreign country with limited knowledge of the language.

The most common difficulty for individuals with aphasia is “finding” the right word to say (word retrieval deficit). Many patients will indicate that a target word is “on the tip of my tongue.” Often, a patient will produce a word that is similar in meaning to the target word (“chair” for “table”) or a word that begins with the same letter or sounds similar to the target word (“tall” for “talk”). This may result in significant frustration as a patient attempts to communicate. Aphasia is often described as “fluent” or “non-fluent”, dependent upon the amount of hesitancy or length of verbal output.

ASSOCIATED PROBLEMS

- ❑ ***Hemiparesis:*** Extremity weakness on one side of the body; may affect ability to write, draw, walk, speak
- ❑ ***Apraxia:*** Motor programming deficit
- ❑ ***Dysarthria:*** Slurring of speech due to muscle weakness
- ❑ ***Dysphagia:*** Swallowing problems
- ❑ ***Visual Deficits:*** Seeing double; partial blindness
- ❑ ***Memory Deficits:*** Recent or distant
- ❑ ***Math/Money Management:*** Difficulties with number concepts

NON-FLUENT APHASIA: COMMON CHARACTERISTICS

- ❑ A person’s speech is hesitant and choppy and generally consists of an abundance of nouns and verbs with deletion of small, non-content words (e.g., “the”, “an” “ it” “of” “on”)
- ❑ Significant grammatical errors (deletion of verb tenses, plural “s”)
- ❑ Understanding, listening and reading are stronger than expressive language (writing and speaking)
- ❑ Written output may be similar to verbal output
- ❑ Patient is usually very aware of errors

FLUENT APHASIA: COMMON CHARACTERISTICS

- ❑ A person will usually produce complete sentences; however, sentences are limited in content and have little meaning (“you know the one that I mean”; “that sounds good to me”).
- ❑ A person will speak around a topic/object and is more likely to produce nonsense words when naming pictures/objects.
- ❑ Comprehension is more impaired than expressive communication; a person’s ability to understand may appear to be better than it actually is as a result of picking up on gestures, context and common routines.
- ❑ Reading and writing are significantly affected.
- ❑ Limited self-awareness of errors.

AUGMENTATIVE/ALTERNATIVE COMMUNICATION

In cases of severe aphasia, it may be necessary for an individual to use alternative means of communication. Most common types of alternative communication are picture boards, letter boards and “yes/no” boards.

COMMUNICATION STRATEGIES

If expressive language deficits exist:

- ❑ Encourage the person to describe what she or he cannot name
- ❑ Encourage the person to use gestures when they speak
- ❑ Encourage writing or drawing to aid in expression
- ❑ Ask simple yes/no questions to clarify the patient's message

If receptive language deficits exist:

- ❑ Gain the person's attention to prepare him/her to listen
- ❑ Speak in a natural voice, as talking loudly will not aid in comprehension
- ❑ Use slow and direct statements
- ❑ Talk about familiar topics and family members
- ❑ Ask simple yes/no questions
- ❑ Use natural gestures to aid in comprehension
- ❑ Use environmental cues (e.g., discuss food during mealtime)
- ❑ Eliminate distraction (radio, television, background conversation)
- ❑ Provide choices when asking questions

IMPORTANT POINTS TO REMEMBER

- ❑ Don't assume a person does not understand if unable to speak
- ❑ Be sure not to use a "child-like" tone when speaking
- ❑ Intelligence has not decreased
- ❑ Aphasia is a language disorder
- ❑ Aphasia affects a person's ability to speak, understand, read and write
- ❑ Communication can be frustrating for people with aphasia
- ❑ The ability to communicate effectively is not dependent upon the ability to speak
- ❑ Follow communication suggestions provided by the Speech-Language Pathologist and medical team
- ❑ Contact the Speech-Language Pathologist with any questions

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