

Aphasia

Aphasia is a disorder that results from damage to portions of the brain that are responsible for language. For most people, these areas are on the left side of the brain. The disorder impairs the expression and/or understanding of language, whether verbal or written.

Aphasia may co-occur with speech disorders, such as dysarthria or apraxia of speech, which also result from brain damage.

Causes:

- Stroke (most common cause).
- Traumatic brain injuries
- Brain tumors
- Brain infections
- Progressive neurological conditions such as Alzheimer's disease.

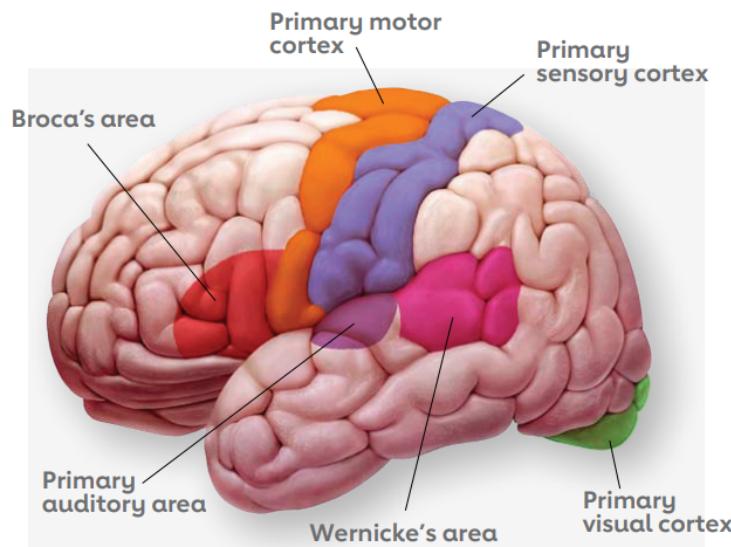
Symptoms: Aphasia does not affect intelligence. People with aphasia usually remain mentally alert even though their speech may be jumbled, fragmented or impossible to understand. They may have:

- Difficulty getting the words out
- Trouble finding words
- Words come out easily but don't make sense
- Incorrect word substitutions
- Difficulty understanding what others are saying
- Problems with reading/writing
- Trouble with long and/or uncommon words

How does it feel to have aphasia:

Imagine not being able to recognize the words on a sign. What would it be like to try and say "put the car in the garage" and have it come out "put the train in the house", or "put the... you know... the thing... the car...".

Aphasia often plunges alert, intelligent people into a world of jumbled communication. People with aphasia are often frustrated and confused because they can't speak as well as they could before their stroke, they can't understand others the way they once could, or both. They may act differently because of changes in their brain.



Certain areas of the brain (usually on the left side) influence the ability to use and understand language. When a stroke occurs in one of these areas, it may result in aphasia.

Recovery and Treatment:

- Following a brain injury, most progress and recovery happens within the first few months, however language abilities can continue improve for several years afterward.
- Aphasia therapy aims to improve a person's ability to communicate by helping restore language abilities as much as possible, helping the person use remaining language abilities, and learn other ways of communicating, such as gestures, pictures, or use of electronic devices.
- Therapy focuses on the specific needs of the person.
- There is no medical cure for aphasia

Family members are encouraged to:

- Participate in therapy sessions, if possible.
- Maintain a natural conversational manner appropriate for an adult.
- When speaking to the person, ensure good lighting, and face the person.
- Minimize distractions, such as a loud radio or TV, whenever possible.
- Include the person with aphasia in conversations.
- Be patient and allow the person plenty of time to talk.
- Encourage the person to be patient with themselves, as well.
- Avoid correcting the person's speech.
- Simplify language by using short, uncomplicated sentences, as needed.
- Repeat the content words or write down key words to clarify meaning as needed.
- Ask for and value the opinion of the person with aphasia, especially regarding family matters.
- Encourage any type of communication, whether it is speech, gesture, pointing, or drawing.
- Help the person become involved outside the home. Seek out support groups, such as stroke clubs.

Start with functional words: Therapy works best when it's suited to the needs and preferences of the patient. With the help of a caregiver if possible, please fill out these categories to best reflect you.

Family members: _____

Friends/neighbors/etc: _____

Pets: _____

City where you live: _____

Places you like to go: _____

Foods you typically eat: _____

Beverages you typically drink: _____

Most requested items: _____

Past/current career: _____

Hobbies _____

Topics you like to talk about _____

Medical needs _____

Common phrases (example: did you check the mail)

Word finding strategies:

For people with aphasia, the most common problem is not being able to think of the word they want. They might try to solve this problem by using a filler word: *that thing, oh you know, the whatever-it's-called*. These generic words are devoid of meaning, so they fail to communicate the intended message. When communication breaks down, try to be patient with yourself. Try a word finding strategy to help your listener know what you are trying to say. This may also help you think of the word.

- **Describe** the word you're thinking of. What does it look like? What does it do? Where would you locate it? What does it remind you of?
- **Narrow it down** with a category. Is it a person, place, or thing? A food? A piece of clothing? A feeling?
- **Substitute** the word with a similar one, or even use its opposite.
- **Look it up.** Think of somewhere the word is written or pictured. You can also use an internet search to help you.
- **Gesture.** Use your hands or body to act out the word.
- **Draw it out.** If you have a pen and paper handy, make sketch out a quick picture of what you're trying to say. You don't have to be an artist to use drawing to communicate.

Language Stimulating Activities

It is encouraged for the person with aphasia to regularly engage in language stimulating activities as often as possible. These include:

- Engaging in conversation with others
- Reading aloud
- Listening to talk radio or podcasts
- Listening to music
- Singing along to music
- Naming objects around the room, or in pictures from a book/magazine
- After watching a movie/show, summarize and discuss what happened

Semantic Feature Analysis

Semantic Feature Analysis (SFA) is a therapy technique that focuses on the meaning-based properties of nouns. People with aphasia describe each feature of a word in a systematic way by answering a set of questions.

SFA has been shown to generalize, or improve word-finding for words that haven't been practiced. It is based on the spreading activation theory that suggests activating the neural networks surrounding a word will strengthen the target word

How it works: Think of a noun, and verbalize the word or write it in the middle of the word map. You can get this word from the functional word list (page 3), or it can be inspired by a recent word that the patient had trouble with.

Ask each of the questions around the picture, writing in or verbalizing the correct answers as they're discussed.

Category: What type of thing is it?

Function: What is it used for?

Action: What does it do?

Location: Where do you find it?

Association: What does it go with? or What does it make you think of?

Properties: What does it look like? (color, shape, size) What does it feel/taste/sound like? What are some characteristics or properties that this thing has?

GROUP

USE

ACTION

(It is a _____)

(You use it to/for _____)

(What does it do?)

(Describe it)

(You find it _____)

(It reminds me of a _____)

PROPERTIES

LOCATION

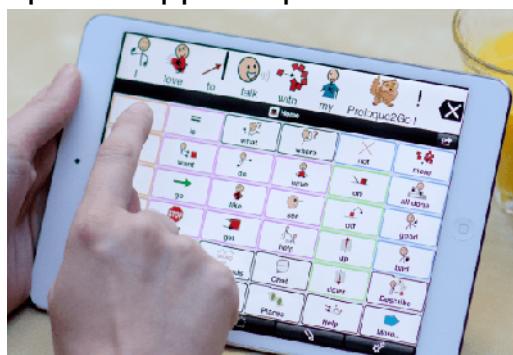
ASSOCIATION

Augmentative-Alternative Communication

Augmentative Alternative Communication (AAC) are strategies, techniques, or devices intended to **supplement or replace**, either permanently or temporarily, insufficient or ineffective communication skills. An AAC treatment approach means focusing on communication and participation rather than on recovery of speech alone.

Examples:

- Gestures
- Writing/drawing
- Communication sheets (see next pages)
- Speech generating device
 - Speech apps on phone/tablet



- Designated device

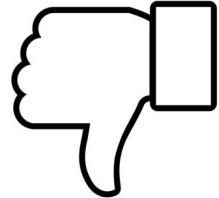


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Yes



No



I don't know



I don't understand



I'm tired



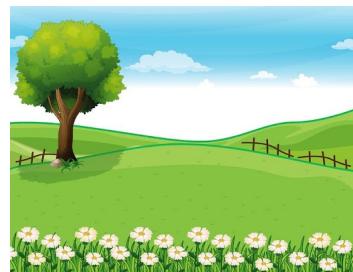
I need to use the bathroom



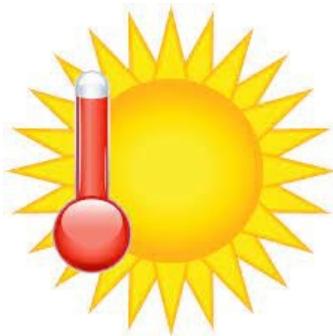
I'm in pain



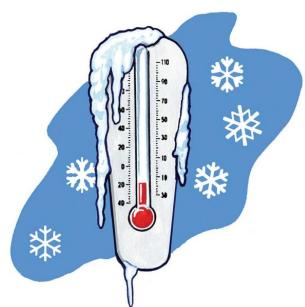
Let's go outside



Too hot



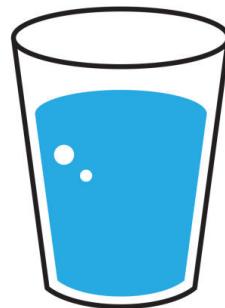
Too cold



I'm hungry



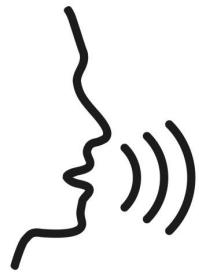
I'm thirsty



I'd like quiet,
please



I have something
to say



I want to be alone



I'd like company



I want to watch TV



I want to listen to
music



