

### Assessment of Aphasia

- > Many standardized tests available
- > Initially often screening tools used or informal assessment
- Provides basic information on the patient's language abilities
- Enables therapist/ team to pitch communication at the level in which the patient understands or can express

### 1. General information

- Obtain medical history
- Obtain history from the patient or significant other
- Determine the patient's primary language
- Determine hearing status and visual acuity
- Determine the patient's pre-morbid language abilities & educational level
- Determine the patient's cognitive function

### 2. Language comprehension

- Does the patient appear to follow the conversation?
- Can they follow 1, 2, 3 -step commands
- Do they comprehend Yes/No questions reliably?
  - Are you in the hospital?
  - Do helicopters eat their young?
- Do they understand gestures or non-verbal communication
- Reading comprehension

### 3. Expressive language

- Conversational speech
  - Fluent?
  - Comprehensible?
  - Slow or laboured?
  - Words or sentences?
  - Paraphasias?
- Naming:
  - Confrontation: What's this?
  - Associative: Pen and \_\_\_, table and \_\_
  - Responsive: Where do you buy milk?

### 3. Expressive language (cont)

- Using names: Who is the Prime Minister?
- Can the person write?
  - Own name, address, letters of the alphabet/ numbers, names of objects etc.
  - In sentences?
    - SLP notes spelling errors/ substitutions/ omissions
- Observations
- Getting ideas to figure out the type of aphasia the client has

### Treatment of Aphasia

Factors to consider:

- Type and severity of impairment

- Motivation

- Medical needs/ condition

Treatments either:

- Restorative

- Compensatory

Goals of therapy:

1. maximize recovery of impaired function
2. assist in the development of communication strategies
3. help the patient adjust to the residual deficits of the brain injury

### Restorative Approaches

Aim to recover skills	use intact abilities to communicate  cortical reorganisation of damaged hemisphere
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	increased involvement of undamaged areas
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Treatment of auditory comprehension and spoken language	directly stimulate specific listening, speaking, reading and writing skills
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	single word, sentence, and paragraph level
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Broad number of techniques	Visual Action Therapy, Melodic Intonation Therapy, Constraint-induced therapy
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	Trigger new neurons to act and stimulate these skills
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### Compensatory Approaches

- > Restorative Approaches may not be appropriate because of the severity of the disorder
- > Train the individual to use any means to communicate
  - new or different ways of completing a task
  - lessen the impact of their communication difficulty
- e.g. AAC/ communication apps, writing or drawing etc.
- > Focusing on communication & participation rather than on recovery of speech alone
- > Helping significant others adjust to a new communication style
- > Compensate for the inability to restore old skills

### Communication Dos & Don'ts

- > Talk to the person as an adult
- > Simplify sentence structure & reduce your rate of speech

### Communication Dos & Don'ts (cont)

- ! but keep speech adult-like
- > Minimize or eliminate background noise
- > Make sure you have the person's attention before communicating
- > Encourage and use all modes of communication
  - Speech/ writing/ drawing / yes-no response
- > Give them time to talk & permit a reasonable amount of time to respond
- > Don't finish sentences for the person with aphasia
- > Accept all communication attempts
- > Keep trying
- > They need to do it if they want to trigger these changes in the brain so don't finish word for them



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