

Aphasia

an overview of this common but misunderstood language disorder

Aphasia is one of the most significant and common conditions caused by brain injury such as stroke or aneurysm. More than two million people in the United States are currently affected by aphasia, but few outside the clinical world know what it is. In fact, given its prevalence, most people have encountered someone with aphasia but just don't know it by name.

It's important to increase public awareness of this language disorder and to recognize the many people who are living with or caring for people with aphasia.

To that end, we've written this overview of aphasia: what it is, what causes it, who it affects, the different types of aphasia, and the ways it can be treated.

WHAT IS APHASIA?

Aphasia is an acquired language disorder defined as the loss or impairment of the ability to use or comprehend words. It affects different aspects of language including speaking, listening, writing, and/or reading. It does not affect intelligence. Just because someone has aphasia does not mean that they are any less intelligent than they were before.

WHAT CAUSES APHASIA?

Anything that damages the language centers of the brain can cause aphasia, including:

- **Ischemic stroke** occurs when a clot blocks a blood vessel in the brain, which prevents blood supply to areas of the brain supplied by that vessel.
- **Hemorrhagic stroke**, when a blood vessel ruptures in the brain. Blood is "poisonous" to the brain, so if any parts of the brain are exposed to blood during a hemorrhage, they will be damaged. For example, a ruptured aneurysm can result in this type of stroke.
- **Acquired brain injury (ABI)**, an event where the brain is hit and damaged by trauma (this is called a traumatic brain injury, or TBI), or damaged by disease, such as a brain tumor or encephalitis.

WHO IS IMPACTED BY APHASIA?

Nearly 180,000 Americans acquire aphasia each year, usually after a stroke or other brain injury. Aphasia affects people of all ages, races, nationalities and genders. More than 800,000 people/year have a stroke in the United States, and an estimated 1.7 million experience brain injury, both of which are common causes of aphasia. The condition is more prevalent than Parkinson's, ALS, cerebral palsy, and muscular dystrophy.

HOW DOES APHASIA IMPACT DAILY LIFE?

Aphasia affects an individual's daily life in many ways. Just think of what you're doing right now – you're reading this document or listening to someone read it to you. If your language is affected, you might not be able to read this document, a newspaper, or even signs on the street. You might not understand your friend on the phone when they call you. You might be in a meeting and just cannot come up with any of the words you need.

Aphasia presents on a spectrum – it can be somewhat mild (for example, constantly feeling like the word is on the tip of your tongue), or it can be very severe (for example, feeling like being in a place where you don't speak the language).

Aphasia affects different language areas in variable ways. It does not always affect comprehension and it does not always affect reading or writing. Everyone is different, depending on what part of the brain was injured.

WHAT ARE THE DIFFERENT TYPES OF APHASIA?

Different components of language may be damaged more or less in each individual with aphasia, resulting in different manifestations of speech and language issues. Below are brief summaries of common aphasia types:

Broca's aphasia: A type of nonfluent aphasia, these individuals typically present with damage that affects the brain's frontal lobe. This aphasia is called a "nonfluent" or "expressive" aphasia because you may understand and know what you want to say, but you may have difficulty finding the right word. You may only be able to speak in a few words or short phrases that may take a lot of effort. You might also omit grammatical words such as "is," "and" or "the." This is called "agrammatism". Why "Broca's Aphasia"? French physician, Pierre Paul Broca, specialized in the study of language in the 1860's. He treated an individual who presented with symptoms of speech loss, yet maintained his intellect. Broca named this new disorder, *aphémie* – the 'loss of articulated speech'.

Wernicke’s aphasia: A type of fluent aphasia, these individuals typically present with damage that affects the brain’s left temporal lobe. It’s called “fluent” or “receptive” aphasia because although you can produce many words (are “fluent”), and use grammatically correct sentences, what you say may not make sense, or your speech may include non-existent or non-relevant words. You also may not be fully aware that what you’re saying doesn’t make sense. Why “Wernicke’s Aphasia?” It’s named after 19th-c. German neurologist Karl Wernicke, who first related this disorder to damage in the left posterior temporal area of the brain.

Global aphasia: When a brain injury affects extensive portions of the front and back regions of the left hemisphere, the result may be global aphasia. People with global aphasia may have difficulty understanding words and sentences, forming words and sentences, and may get out only a few words.

Anomic aphasia: This is the mildest aphasia type. If you have it, you have relatively preserved speech and comprehension, but difficulty in finding words.

Primary progressive aphasia (PPA): A type of frontotemporal degeneration in which symptoms begin gradually and worsen over time. People with PPA can lose the ability to speak and write, and eventually to understand written or spoken language. Sometimes this condition is confused with dementia. Speech therapy can be provided throughout the course of the disease, with the goal being to maximize communication ability for as long as possible.

HOW CAN APHASIA BE TREATED?

Many treatment options are available, usually through speech-language pathologists (SLPs) in rehab centers, skilled nursing facilities, clinics, or at home. These treatments seek to help people with aphasia reclaim their lives, and to return to work when possible.

Treatment can be some or all of these activities:

Working one-on-one with a SLP on language and daily living skills. For example, sessions may focus on conversation, reading the newspaper and summarizing the main messages to a clinician or family member.

Working on a customizable app like Constant Therapy to target specific skill areas both in the clinic and at home. For example, Constant Therapy’s Word Retrieval & Speaking categories have many individual tasks that help the brain to more easily find words again.

A weekly book club or video conference to practice conversation skills and understand spoken language.

Participating in research studies to help scientists discover the most effective ways to create individualized treatment programs for aphasia.

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The most important thing to know is that, because of neuroplasticity, **there is no end to recovery**. The myth that individuals only have one year to recover after brain injury and after that there is no more improvement has been proven by science to be false. Patients can continue to improve, with the right therapy, for the rest of their lives.

Constant Therapy is an award-winning, customizable cognitive and speech therapy app, created for survivors of stroke, brain injury, aphasia, and other neurogenic disorders. Patients can use Constant Therapy in-clinic with a clinician, or at home for additional practice. Download Constant Therapy now in your preferred app store.