

A Letter from Home

A NEWSLETTER FOR CAREGIVERS

VOL. 12, ISSUE 3

JUNE 2011

A PUBLICATION OF THE INDIANA ASSOCIATION FOR HOME & HOSPICE CARE, INC.

APHASIA AWARENESS: TRYING TO BRIDGE THE COMMUNICATION GAP

Osbr sljsdos smf zo vsm mpy imfrtdysmf yjr eptld upi dsuk. Pdrsdn nrsyjormy eoyj, yjy O nohgy vpptrjrmf ejsy upi dsu. yjsdos epivf nr brtu gtidytsyomh fodrsdr. Epilfmy oy nr yrtonpr yp mpy lmpe ejsy smpyjrt od dsuomhz?

June is National Aphasia Awareness Month. Aphasia is a condition that causes a loss in the ability to communicate verbally or using written word. Imagine having to make sense of the paragraph above. It would be frustrating and scary, especially because aphasia often presents itself suddenly. The person may wake up and find they no longer understand or can express words or writing. It is as if they have been dropped into a totally different country, with no understanding of the foreign language. Generally, aphasia results as a symptom of brain injury, most commonly from stroke, brain tumor, infection or head injury. Aphasia is estimated to affect about one million people in the United States per year.

Aphasia does not affect intellect, rather

it impairs a person's ability to speak and understand others, and most people with aphasia experience difficulty reading and writing. Aphasia affects everyone differently, depending on the amount and location of the brain damage that has occurred. Each individual with aphasia will have a unique set of speech and language problems. It can range from difficulty finding a word they want to say to total and complete inability to speak or understand language.

Many with aphasia know the word they want to say and understand the meaning, yet they cannot say it. The words often come out scrambled or they may seem to others to be nonsensical. Some with aphasia may say, "no" when they mean "yes", or may say the same word over and over, as if stuck. Others may curse or utter whatever is on their mind, as if they have lost all ability to filter their thought processes.

Three Types of Aphasia

According to the American Stroke Association, there are three common forms of aphasia:

- **Global aphasia**—when a stroke affects an extensive portion of the front and back regions of the left hemisphere, the result may be global aphasia. Those with this type of aphasia may be completely unable to speak, name objects, repeat words, or follow commands.





Confirm that you are communicating successfully with “yes” and “no” questions.

Many patients with aphasia may say, “no” when they mean “yes”, or may say the same word over and over, as if stuck.

- **Broca’s aphasia**—when a stroke or accident injures the frontal region of the left hemisphere, different kinds of language problems can occur. This part of the brain is important for putting words together to form complete sentences. Those with this type of aphasia may often say something that does not resemble a sentence or may know what they want to say, but cannot say the actual words. They may have trouble understanding sentences and can make mistakes in following directions like “left, right, under, and after”.

- **Wernicke’s aphasia**—when the part of the brain is affected that controls comprehension; a person will have problems with receiving information. People with this type of aphasia have challenges because our dictionary of words is shelved in a similar region of the left hemisphere, near the area used for understanding words. Those with this type of aphasia can seldom understand what is being said or to control what they are saying.

How to Communicate

Those with aphasia will have different rates of recovery. Many will continue to improve over time. It is often a slow process for both clients and their families. Some may make a full recovery, while others will be left with a permanent disability. Clients with aphasia will often need to learn compensatory strategies for communication. It is important that you work in harmony with the client, family, and home care team to tailor a communication tool to meet the individual needs of the client. The following are some guidelines for communicating with an aphasic client:

- Do not talk about a client in their presence, even if they are not able to communicate. Always assume they can hear and understand.
- Include the client in conversation.
- Make sure the client can see you when you are speaking.
- Allow much extra time for the client to respond.
- List on paper or index cards some of the most commonly needed items and expressions.
- Play music or even sing. Sometimes a client with aphasia who cannot speak can sing.
- A laser pointer can be useful.
- Speak slowly and clearly.
- Eliminate distractions while communicating.
- Treat your client like an adult and remember their intellect is most often not affected.
- Help the client and family cope with feelings of depression and frustration.
- Do not pretend to understand. Be honest.
- Encourage and use other methods of communication, such as drawing, writing, gestures, and non-verbal communication.
- Ask yes/no questions, but make sure the client uses yes and no appropriately.