

Living with Dysphasia

Living with a language disorder is difficult in a world dependent on communication. How can you continue to thrive after a dysphasia diagnosis? By Sarah Sutherland

Dysphasia, sometimes referred to simply as aphasia, is a language disorder that causes partial or complete inability to communicate. The disorder can take two forms: receptive dysphasia, or difficulty in comprehension, and expressive dysphasia, or difficulty in combining words into coherent sentences.

While all types of dysphasia are either receptive or expressive, there are multiple subtypes of dysphasia that can arise and affect individuals in different ways. For example, while individuals with Broca's dysphasia experience difficulty with speech production, prosody and syntactic comprehension and are aware of their language difficulties, those with Wernicke's dysphasia are able to speak fluently but without content and lack awareness of their language difficulties. Your physician can offer you more information about your specific type of dysphasia and how it might affect you.

Dysphasia is caused by a lesion of the dominant hemisphere. However, just as there are many types of dysphasia, there are many causes of this lesion. It is most commonly caused by cerebrovascular disease, but it can also arise from a space-occupying lesion, head injury or dementia.

LIVING WITH A DIAGNOSIS

There is no known cure for dysphasia, but that doesn't mean that you cannot continue to thrive after your diagnosis. First and foremost, connecting with a speech-language pathologist (SLP) will be a crucial part of determining your best path of care. Speech and language therapy might sound daunting, but rest assured that your SLP's top priority is helping you to lead a successful life with dysphasia.

Although therapy will be tailored to your specific needs, it will likely start with a

thorough assessment of your specific dysphasia followed by exercises to encourage the recovery of speech and understanding. Those exercises will differ from patient to patient, but your SLP should be able to give you an idea of what to expect as you proceed with your therapy.

It's important to realize that the extent to which your speech will recover depends largely on the severity of your dysphasia, but no matter how severe your dysphasia is, you shouldn't be discouraged if you aren't noticing improvements in a short period of time. Some therapies take longer than others, and there are many new treatments in trial stages. New medications and therapies are constantly appearing, so make sure to ask your physician any questions you have about upcoming treatments.

TIPS FOR COMMUNICATION

Receiving a language disorder diagnosis can be scary in a world so heavily dependent on communication, but here are ways for you and your family to adapt to your new way of life. The American Stroke Association offers a series of communication tips for individuals with dysphasia and their families, including:

(For patients):

- Educate yourself about aphasia so you can learn a new way to communicate.
- Close family members need to be involved so they can understand their loved one's communication needs and begin to learn ways to facilitate speech and language.
- Experiment with strategies that facilitate

social interaction during your rehabilitation.

- Many stroke survivors with communication challenges compensate by writing or drawing to supplement verbal expression, or use gestures or a picture communication book, or even a computer communication system.

(For families):

- Ask "yes/no" questions.



- Paraphrase periodically during conversation.
- Modify the length and complexity of conversations.
- Use gestures to emphasize important points.
- Establish a topic before beginning conversation.

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