

Aphasia and Stroke

American Stroke Association

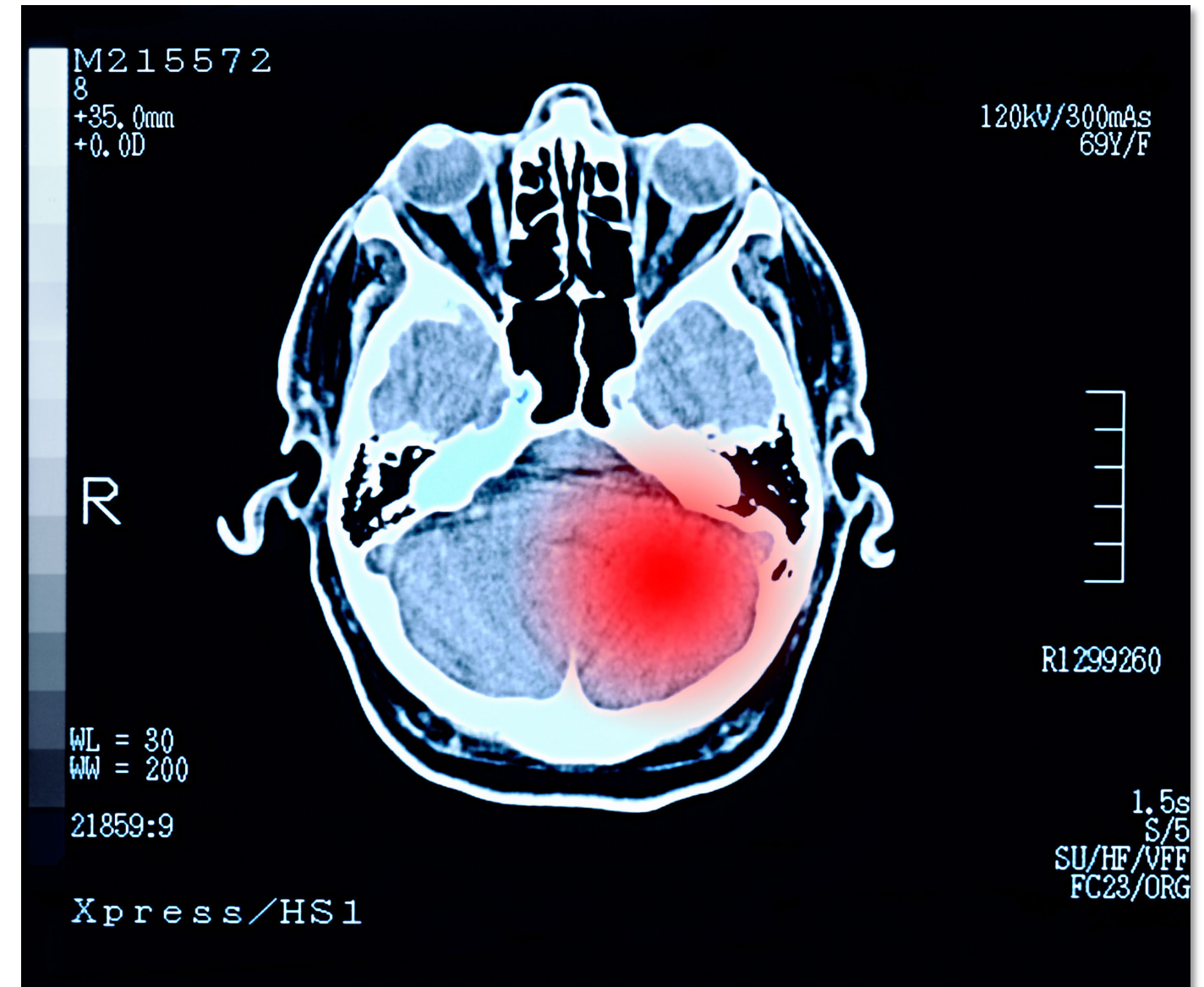


PRONOUNCED:

Uh•Fay•Zhuh

- Aphasia is a language disorder that impairs the ability to communicate.
- It's most often caused by stroke-related injuries to areas of the brain (usually on the left side) that control speech and language.
- It affects about one-third of acute stroke patients.
- Stroke survivors with aphasia face an increased incidence of post-stroke depression versus stroke survivors with no aphasia.

What is Aphasia?



Effects of Aphasia

Aphasia can cause a person's speech to be jumbled, fragmented or hard to understand. They can develop:

- Difficulty "getting the words out"
- Trouble finding words
- Trouble with long and/or uncommon words
- Speak in short or incomplete sentences
- Speak in sentences that don't make sense
- Write sentences that don't make sense
- Difficulty understanding what others are saying
- Problems with reading, writing or math

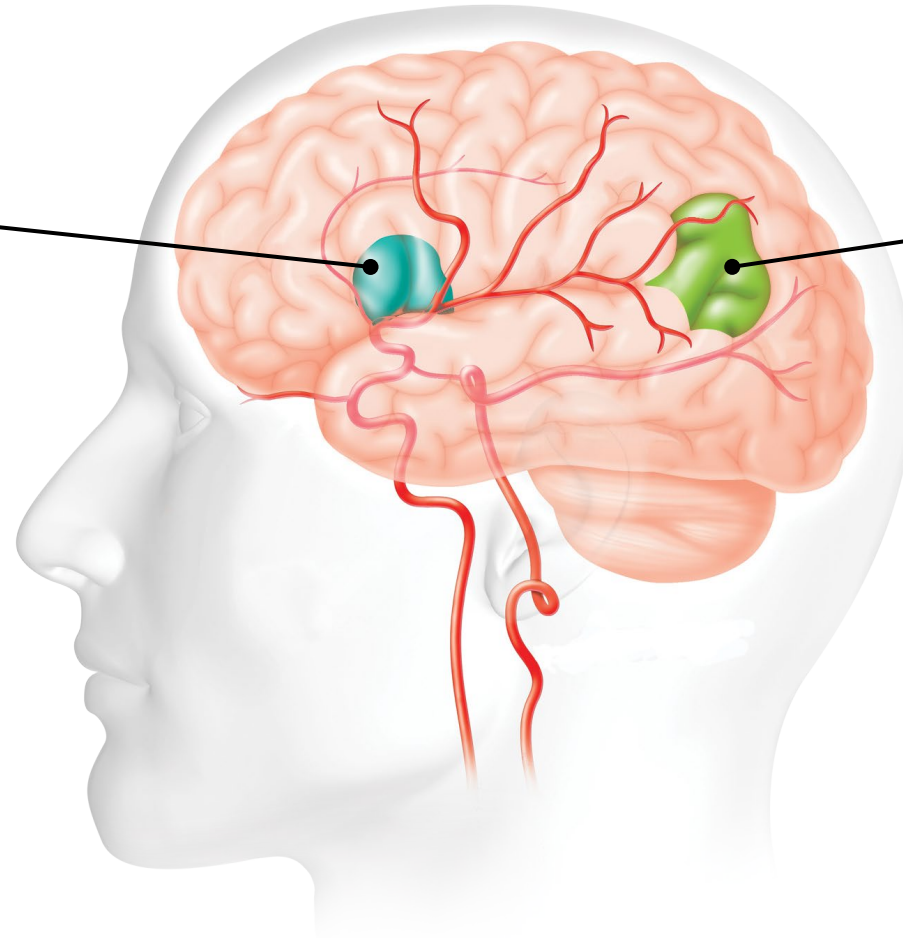
**Aphasia doesn't
affect intelligence.**

How Aphasia Works

To better understand how aphasia works,
let's first look at two specific parts of the brain:

BROCA'S AREA

Part of your frontal lobe, this part of the brain is located on the left side just forward of your temple. It controls the muscles you use to speak.



WERNICKE'S AREA

Part of your temporal lobe, this part of your brain is located on your left side just above your ear. It controls your ability to understand and choose the right words to use when speaking.

Both of these areas of the brain work together to help you speak.

Types of Aphasia

BROCA'S APHASIA

Also known as “expressive aphasia,” is one of the more common forms and can involve:

- Struggle to form words
- Repetition of words or phrases over and over
- Trouble repeating back words or phrases

WERNICKE'S APHASIA

Also known as “fluent aphasia” or “receptive aphasia,” is also a common form and can involve:

- Stringing together words that sound like a sentence but don't make sense together
- Use of wrong words, adding unnecessary words or creating made-up words
- Stringing together words that sound like a sentence but don't make sense together
- Use of wrong words, adding unnecessary words or creating made-up words

GLOBAL APHASIA

The most severe form of aphasia and may include:

- Struggle with speaking
- Severe impairment in forming and understanding words and sentences
- Difficulty repeating back words or phrases
- Inability to read or write

Types of Aphasia, cont.

Less common types of aphasia include:

- **Anomic aphasia:** Struggle to find words, especially names of objects or words that describe actions, resulting in using several words to explain what they mean.
- **Conduction aphasia:** Struggle to pronounce words, especially when trying to repeat something that was said to you.
- **Mixed transcortical aphasia:** Similar to global aphasia, except people can repeat what is said to them.
- **Transcortical motor aphasia:** Similar to Broca's aphasia but less severe. Ability to repeat phrases or sentences said to you.
- **Transcortical sensory aphasia:** Similar to Wernicke's aphasia but less severe. Ability to repeat what was said to you. This type of aphasia is common with progressive brain conditions such as Alzheimer's.

Complications of Aphasia

An inability to speak can compromise quality of life.
Communication difficulties can affect your:



Job



**Relationships with
other people**



**Day-to-day
functioning**

This can result in isolation, anxiety, frustration and depression.

Aphasia versus other speech-related disorders

- **Aphasia** is an impairment in the ability to use and/or comprehend words.
- **Apraxia of speech**, or verbal apraxia, involves difficulty moving muscles needed to speak even though there is no paralysis or weakness of those muscles.
- **Oral apraxia**, or nonverbal oral apraxia, involves difficulty moving the muscles of the lips, throat, soft palate and tongue for purposes other than speech. Examples include smiling and whistling.
- **Dysphasia** is another term for aphasia.
- **Dysarthria** speech disorder is caused by muscle problems, making it hard to talk. You make speak too loudly or softly, at uneven speeds, mispronounce words or have unusual changes in pitch.
- **Aphasic acalculia or secondary acalculia** is the inability to process numbers and perform calculations.

Diagnosis

- **Aphasia is typically first recognized by the health care professional** who treats you and performs a physical and neurologic exam.
- **If you have any changes in communicating or understanding others, ask your doctor for a referral to a speech-language pathologist (SLP).** SLPs work with people of all ages and treat communication and swallowing problems.
- **Magnetic resonance imaging (MRI) or computed tomography (CT) scan** can be used to confirm brain injury and to identify its location.
- **You will also be evaluated for your ability to understand and speak.** This includes answering questions, naming items, holding a conversation, following instructions and reading and writing.



Treatment Options

- **There are no medications for aphasia.** However, there are therapy activities that can help you get better so you can participate in the things you like to do.
- **Tremendous improvements to your language and communication abilities can take place in the first few months.** In many cases, some aphasia remains following the early recovery time. But don't ever give up! Language and communication abilities can continue to improve for many years.



FACT:

Aphasia therapy aims to improve your ability to communicate by using your current language abilities, restoring lost language abilities and learning other ways of communicating.

Coping Techniques

Take your time.

It may take a while to
get the words out.



Coping Techniques

Let people know what works best for you, for example:

Questions to be asked in multiple ways.

Questions requiring only a Yes/No answer from you.





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Coping Techniques

Use assistive devices.

Use photos, diagrams, pen and paper, closed captioning or other helpful tools.



Coping Techniques

Frustration is OK.

Don't blame yourself if you get stuck or stumble over your words. Be patient with yourself as you learn what works.



Coping Techniques

Carry an Aphasia ID card.

Many people are not familiar with aphasia. Present this card when buying groceries, paying for gas, meeting new people. It can be also helpful in other situations when you think a person might need to be informed that you have aphasia.



Coping Techniques

What to do if you get stuck

1. Admit you're struggling.
2. Recap what you've discussed so far.
3. Decide whether to continue or come back to the subject later.
4. Try a different method of communicating such as drawing, hand gestures, etc.



Talking to Your Health Care Professional

- Remember, if you have aphasia, talk to your health care professional.
- Be sure to be open and honest and explain what you are experiencing.
- Make it clear that your problems with understanding and communication started after your stroke.





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Group Discussion

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What is aphasia?





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Is aphasia common in people with stroke?





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What signs may suggest someone has aphasia?





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What are the different types of aphasia?



Have you experienced any complications of aphasia? What was it like for you?





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How do you know which type of aphasia you have?





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What strategies have you tried to help your aphasia? What has worked and what hasn't?





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For more information and resources
on aphasia after a stroke, visit
stroke.org/aphasia