Communication Breakdown

Aphasia/dysphasia
INTRODUCTION

The ability to communicate is a central need for all human beings. However, following a stroke, the communication process which has been natural throughout someone’s life suddenly becomes disrupted. There are 2 main types of communication problem which all result from damage to the brain. Not only is the actual communication disrupted but the impact on an individual’s life is very significant. Both the characteristics of the communication disorders and the impact on life will be considered.

APHASIA

Aphasia is an **acquired neurological disorder** affecting someone’s ability to understand and use language. This simply means that it is not a condition from at birth – it is “acquired” at some future point in life; it **happens in the brain** (neurological) and it **affects both the understanding and expressing oneself**. Aphasia usually results from damage to the left side of the brain.

Because we live in a world which relies heavily on language in order to communicate, aphasia compromises the person’s ability to communicate successfully and easily. If you imagine yourself abroad: you are not intellectually impaired (neither is the person with aphasia); you simply have trouble understanding the spoken and written word and using the language to speak or write. However, you can often still communicate using signs, symbols, gesture, drawing etc.

You may hear both terms “aphasia” and “dysphasia” being used. The terms tend to be used interchangeably although strictly speaking “aphasia” refers to total loss of language and “dysphasia” to a partial loss.
FEATURES OF APHASIA

While disruption of spoken language is the most obvious feature of aphasia, written language (reading and writing) is usually also affected to some extent. The majority of people with acquired aphasia will therefore experience a degree of difficulty with all of the following:

Speaking
Understanding what other people are saying
Writing
Reading

3.1 Problems with speaking/telling

Some of the problems with telling/speaking experienced by people with aphasia are as follows:

- saying one word, meaning another  e.g. pen - book
- mixing up sounds in words  e.g. tatle – table
- broken, fragmented sentences  e.g. I Glasgow
- saying parts of words  e.g. Gl..Gla…Gla…Gla..sgow
- circumlocution  i.e. talking around a subject; unable to be specific
- swearing
- saying the same thing over and over again, irrespective of the message
- making up words which don’t exist or speaking with real words but not making sense (although the person IS NOT demented)
3.2 Problems with understanding

For the majority of people with aphasia, their ability to understand both the spoken and written word will be affected to a certain extent. It is often not apparent when first speaking with someone.

Some of the related problems are:

- understanding only key words (i.e. words which carry meaning and are important for understanding the key points of the message)
- understanding mainly gesture and context
- understands short phrases
- requires repetition to help understanding
- “appears” to understand - social facade
- poor listening skills
- answers what he thinks has been said

There is a wide range of difficulty with comprehension from the person who understands everyday conversation to the person who appears to understand very little of what is said.

It is important to realise that many people with aphasia have the language ability to cope with concrete information but abstract / idiomatic information can be very difficult for them to understand. This has implications for jokes, word associations, cryptic clue type puzzles etc.
3.3 Problems with writing

People with aphasia often have difficulty writing down their message – even when they know what they are trying to say. The difficulty is not in saying or writing the word but in finding the right word from the huge library store in our brains. Some of the problems experienced with writing are:

- may be unable to write single letters
- may be able to copy without knowing what he’s writing
- may write one word and mean another
- may write part of a word and be unable to complete it
- may be able to complete a word if it is started
- may only be able to select from a group of letters to make a word

In addition to the problems accessing the words, there is invariably the added problem of weakness or paralysis and the need to use the non-dominant hand for writing. Some individuals will simply not attempt writing and others will be very anxious as it may be yet another aspect of their stroke which they will have to face up to.
3.4 Problems with reading

Reading for many people is a very relaxing activity and a life-line for many who may be house-bound. Unfortunately, if you have aphasia, reading may become very difficult.

The following problems may be experienced:

- may not understand the written word at all
- understands only key words and phrases
- may understand if accompanied by picture
- may read aloud accurately but not understand
- may not be able to read aloud but can understand
- may understand short phrases
- may pick up the gist of a phrase

When you consider the number of daily activities which require a degree of reading ability, you can imagine how disabling this symptom might be:

- Newspapers
- TV programmes
- Instructions
- Recipes
- Medicine labels
Aphasia is therefore a very complex condition which affects many parts of ability to use language. If you take some time to consider the impact of aphasia on someone’s life, then you begin to sense something of the devastation and isolation which aphasia can have.
Dysarthria is another communication difficulty resulting from stroke. Dysarthria is a problem with speech due to muscle weakness and may result in the following:

- speech which sounds slurred, indistinct
- weak, breathy voice
- strained, strangled voice
- hoarse, husky voice
- speech which is effortful
- drooling due to weak muscles
- difficulty controlling volume of speech

It is important to remember that the person with Dysarthria is able to produce the words and sentences appropriate to the conversation – they simply sound unclear. The person with Dysarthria also understands what is said and is able to read and write (although they may have a paralysis or weakness which makes this more difficult). They have no problems finding the right words and no difficulty making sentences.

Often as the listener, you have to watch the individual carefully. Imagine your own experience following a dentist’s injection! You can understand, read and write but speech may sound slurred and unclear.
5 SUMMARY

There are 2 main communication disorders resulting from stroke:

**APHASIA:** affecting someone’s ability to *speak* (form/find words and sentences), *understand the spoken and written word and write*

**DYSARTHRIA:** affecting someone’s ability to *produce clear speech*

The aim of this module is not to make sure you know the technical terms but to help you understand that there is a wide range of communication problems which result from stroke. Do not worry about remembering the technical terms – it is more important that you know what problems someone is having so you can provide the appropriate support to enable them to take part in activities.

The experience of communication difficulty can be very isolating. Many people are ignored and find family and friends may show little understanding of the problems which often adds to the feelings of isolation and incompetence. This is far from the truth.

Communication difficulty resulting from stroke **does not mean** someone is intellectually impaired; it **does mean** that you or I will have to work hard to find a successful way of supporting this individual to “tell” their story and understand the complexities of any conversation they may be having.