Introduction

• 1 million, or 1 in 250, Americans are currently living with aphasia (ASHA, 2015)
• Aphasia is a “multimodality disturbance” of language (Cherney, Patterson, Raymer, 2011), which affects a patient’s quality of life.
• Patients with aphasia seek medical care and rehabilitation services (Poslawsky, Shuurmans, Lindeman, Hafsteinsdottir, 2010).
• The dosage (frequency, intensity) of services vary and can influence the amount of function regained (Allen, Mehta, Teasell, 2012).
• It is unclear what the best dosage may be for patients with aphasia.

Case Scenario

• Student clinician at the University of Nevada, Reno
• 52 year old female with aphasia following a stroke
• Severe memory impairments following the cerebrovascular accident
• Family is concerned she needs to heal more before she can be discharged
• Want to know how delaying speech therapy could affect her overall recovery

References


Purpose

The purpose of this study was to determine if adults with Aphasia due to a stroke or other cerebrovascular accident (CVA) show greater improvements according the Western Aphasia Battery Aphasia Quotient or other aphasia scales with intensive therapy immediately following the trauma as opposed to less intense or postponed therapy.

Methodology

• Search terms: systematic review of intensity of therapy in aphasia, intensity of aphasia therapy, and proximity of therapy post-stroke
• Databases: PubMed, CINAHL, and ERIC electronic databases
• 94% inter-rater reliability was achieved
• 5 articles were selected citing direct relevance to the purpose of this study

Results

<table>
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<tr>
<th>Authors, Dates, Design</th>
<th>Purpose</th>
<th>Participants</th>
<th>Dependent Variables</th>
<th>Results</th>
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<tr>
<td>Cherney, Patterson, Raymer, Frymark, &amp; Schooling (2008)</td>
<td>Systematic Review</td>
<td>Evaluate effects of treatment intensity/constraint-induced language therapy (CILT) on language impairment.</td>
<td>N = 141</td>
<td>WAB Aphasia Quotient</td>
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<td>Godecke, Ciccone, Granger, Rai, West, Cream, Cartwright, &amp; Hankey (2013)</td>
<td>Experimental Multiple-Baseline design across subjects</td>
<td>Compare Very Early Rehab (VER) (20 sessions, 1/5 weeks) to Usual Care (UC) at 4-5 weeks &amp; again at 6 months post stroke.</td>
<td>N = 47</td>
<td>Western Aphasia Battery Aphasia Quotient (AQ)</td>
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<td>Rai, Godecke, Ciccone, Armstrong, Granger, &amp; Hankey (2013)</td>
<td>Non-Experimental Study</td>
<td>To examine predictors of very early aphasia recovery through statistical modeling.</td>
<td>N = 79</td>
<td>WAB Aphasia Quotient</td>
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<td>Bakheit, Shaw, Barrett, Wood, Harrington, Griffiths, Searle, &amp; Koutsis (2007)</td>
<td>Experimental Study Randomized Control Trial</td>
<td>To examine whether the amount of speech and language therapy influences the recovery from post-stroke aphasia.</td>
<td>N = 116</td>
<td>Western Aphasia Battery</td>
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<tr>
<td>Martins et al. (2015)</td>
<td>Experimental Study Multiple-Baseline design across subjects</td>
<td>To compare the efficacy of 100 hours of SLT in a regular treatment (RT) versus intensive treatment (IT) in sub-acute post-stroke aphasia.</td>
<td>N = 18</td>
<td>Western Aphasia Battery Aphasia Quotient (AQ)</td>
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Discussion

E1: Cherney et.al. (2008), Godecke et.al. (2013), Rai et.al. (2013), and Martins et al. (2013) all determined that speech-language therapy that is intense and early in post stroke recovery is likely to result in improved functional communication abilities in adults with aphasia.
E2: The family’s concern remains that the client’s memory deficits will cause her to be overwhelmed and confused by therapy. However, they are also concerned with the bigger picture and her overall recovery. They want to maximize long term gains and if delaying therapy will reduce long term gains then this is not an optimal option.
E3/BP Decision: Taking into consideration the family’s concerns regarding the client’s memory deficits, I will begin speech-language therapy as soon as possible. I will incorporate empirically supported exercises that focus on memory as well as expressive and receptive language.