

ACQUIRED LANGUAGE DISORDERS

A CASE-BASED APPROACH

FOURTH EDITION

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Case Scenario: Sophie

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H&P: Sophie is a 63-year-old white female admitted to the ED via emergency medical services; found on first floor of her home, sitting in a chair; lethargic, slurred speech; disoriented.

PMH: Hypertension, hyperlipidemia, IDDM, osteoarthritis.

Social History: Lives alone in two-story home, two blocks away from daughter and her family. Retired schoolteacher.

Surgical History: s/p right total hip replacement (THR); s/p angioplasty with stent in left anterior descending artery.

A Functional Analysis of Sophie

Sophie's ability to comprehend language in both verbal and written forms is within functional limits. Figure 4–11 shows Sophie's diagnostic profile, and Figure 4–12 shows her Target Assessment Snapshot. Reading ability is normal at sentence and paragraph levels. Her confrontational naming ability and word finding during discourse remain a challenge. However, Sophie can express herself to make her needs and wants known, even though she tends to use circumlocutions to convey ideas. Speech rate and prosody are normal, and intelligibility is good, but fluency is impacted by her word-finding difficulties. Consequently, Sophie has many pauses and self-correcting attempts during phone

Language Expression	Automatic Speech: WFL for counting, days of the week, alphabet.	Repetition Ability: Normal repetition for words, phrases and sentences.	Lexical Retrieval-Naming: Impaired for confrontation naming and lexical retrieval during discourse; circumlocutions noted.	Conversational Ability: WFL; however, word finding difficulties impact speech fluency in conversation.	Pragmatic Skills: WFL	Paraphasias: None.
Speech	Rate: WFL	Intelligibility: WFL	Prosody: WFL	Articulation: WFL	Fluency: Impacted by word-finding difficulty.	
Auditory Comprehension	Answering Yes/No Questions: WFL	Executing Commands: WFL	Understanding Stories & Paragraphs: WNL	Understanding Conversational Speech: Comprehension for sentences and discourse is WFL.	Identifying Objects & Their Functions: WNL	
Reading	Word-level Comprehension: WFL	Sentence-level Comprehension: WFL	Oral Reading: WFL	Oral Spelling: Letter substitutions noted in minimal pairs, e.g., mat for hat.		
Written Expression	Copying: WFL	Writing to Dictation: WFL	Self-generated: Affected by word-finding difficulty.	Written Spelling: WFL for basic words.	Drawing: WFL	
Cognition	Attention/Concentration: WFL	Visuospatial Skills: WFL	Memory: Long-term memory and working memory intact for procedural, semantic, and episodic systems.	Executive Functions: WFL		
Behavioral Symptoms	Alertness: WFL	Deficit awareness: Keen awareness of deficits.	Frustration: Demonstrates extreme frustration with inability to retrieve desired words.	Emotional Lability: None.	Current Personality Characteristics: Pleasant and apologetic for her word-finding problems.	

Figure 4-11. Diagnostic profile for Sophie.

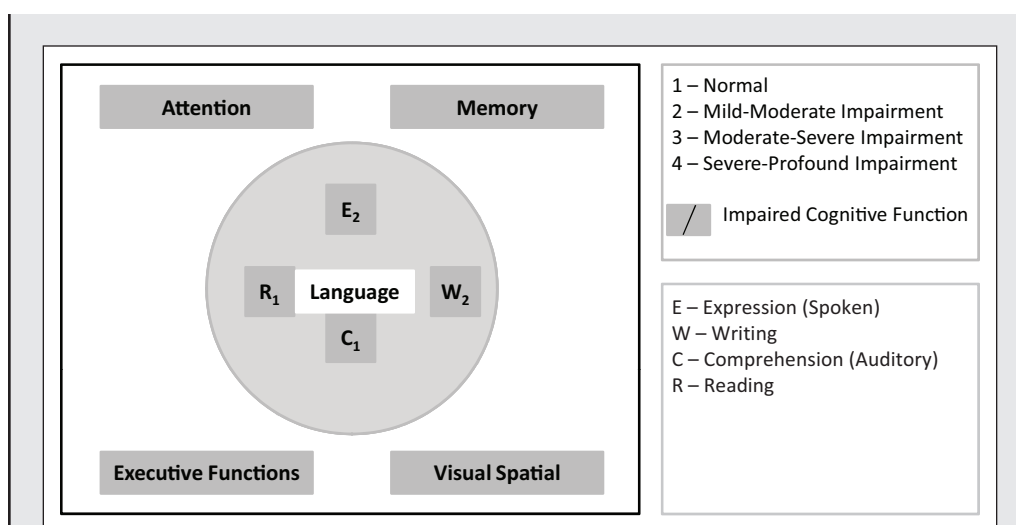


Figure 4-12. The Target Assessment Snapshot for Sophie.

conversations and in public encounters, for example, scheduling appointments, shopping, reporting a billing error on her credit card, and managing public transportation exchanges.

Sophie's writing skills are good. She can write sentences but has some lexical-retrieval difficulty in this domain as well. When she cannot think of a needed word, she may ask the listener for help as she struggles. Although this can be an effective compensatory strategy, it is not always practical in public venues. Therefore, this causes more frustration for Sophie in that she knows she can find the means to express her ideas but cannot readily use them in certain public scenarios.

Cognitively, Sophie displays good attention to tasks and can concentrate, especially if the task is of interest to her. Her memory skills for her ADL appear to be functioning within normal limits, and she is able to recall basic information from events in the recent and distant past. She recalls how to cook her favorite meals and is able to manage her money and pay bills. Planning and judgment appear to be intact for common household tasks and chores, making appointments, and organizing her day. Sophie maintains a vibrant social network with her family and friends who are supportive of her rehabilitation goals. Although she is keenly aware of her deficits, she maintains a pleasant demeanor and continues to improve her functional communication skills by being actively engaged in her therapy program.

Critical Thinking/Learning Activity

- People with anomie aphasia can be classified into treatment categories that are semantically based, phonologically based, and self-cued (Boyle, 2004).

- How would you attempt to determine the most beneficial treatment for your patient?
- What will you use to support semantic and phonemic cueing?
- Which of Sophie's strengths can you use to promote word-finding lexical retrieval?
- How will you advance Sophie's conversational skills with a variety of communication partners?
- Do you view Sophie's word-finding difficulties as a receptive or expressive deficit? Explain.

Treatment Considerations

Some general therapeutic objectives and techniques applicable to Sophie's deficit profile include the following:

- Improve lexical retrieval to request information and assistance using semantic feature analysis (SFA).
- Increase engagement in conversation with designated people using aids that facilitate oral naming, including supportive pictures and written list of functional words.
- Make needs and wants known with semantic and phonemic self-cueing to increase word finding. Provide words following circumlocutions.
- Based on Sophie's needed ADLs, make her needs and wants known for use during conversation and begin facilitating their use in functional contexts.

Therapeutic Goals Using A-FROM

Sophie's goals reflect her awareness of her word-finding difficulties. As a retired schoolteacher, she wants to use the correct words when talking to family, friends, clerks, and doctors. She wants to communicate effectively when making appointments, shopping, and talking to people in public places and on the phone. Her good executive functioning skills for attention, memory, and comprehension of verbal and written language are strengths.

1. Sophie will join an aphasia conversation group with a focus on the LPAA (Elman, 2000) to improve real-life participation involving activities that are meaningful to her.
2. Sophie will increase her lexical-retrieval skills for words using the SFA for nouns (Boyle & Coelho, 1995; Coelho et al., 2000) and verbs (Wambaugh et al., 2014), with diagrams for cueing.

- 3. Counseling is recommended for Sophie and her daughter for improved family knowledge and support.
- 4. Facilitate lexical retrieval (word finding) during conversation using Narrative Story Cards (Helm-Estabrooks & Nicholas, 2003).

Figure 4–13 provides the A-FROM domains (Kagan et al., 2008) for Sophie that were used to formulate her therapeutic goals.

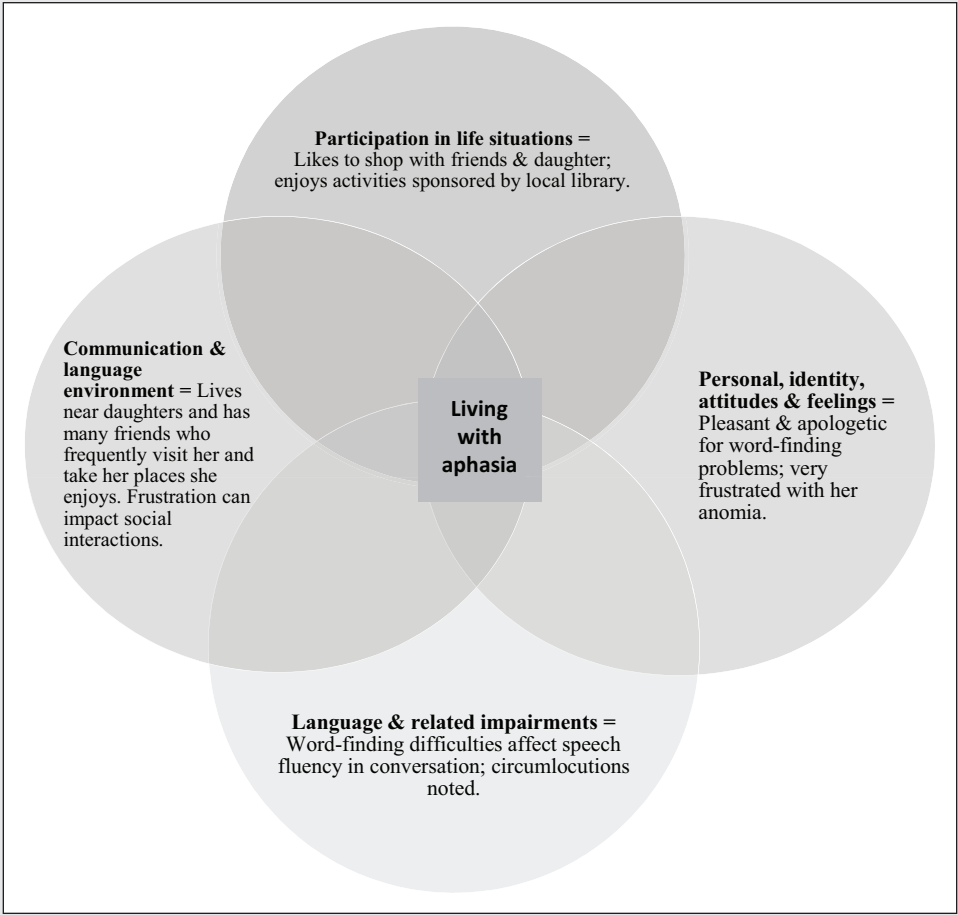


Figure 4–13. The A-FROM model for Sophie.