

Asphasia

ADVICE FOR CARERS

What are the different forms of Asphasia? –

Asphasia can take many forms, depending on which part of the brain has been damaged.

Understanding, speaking, reading and writing can all be affected. There are two basic forms of Asphasia: receptive Asphasia and expressive Asphasia. In some people, stroke causes both types.

Receptive Asphasia –

A person who has receptive Asphasia will have difficulty making sense of what he or she hears – the meaning of the word is blocked, Receptive Asphasia can make reading difficult or impossible.

Expressive Asphasia -

A person with expressive Asphasia will have trouble speaking. This may be because of an inability to find the words to say, or difficulty in choosing and ordering words to describe thoughts or ideas. Expressive Asphasia can also cause difficulties with writing.

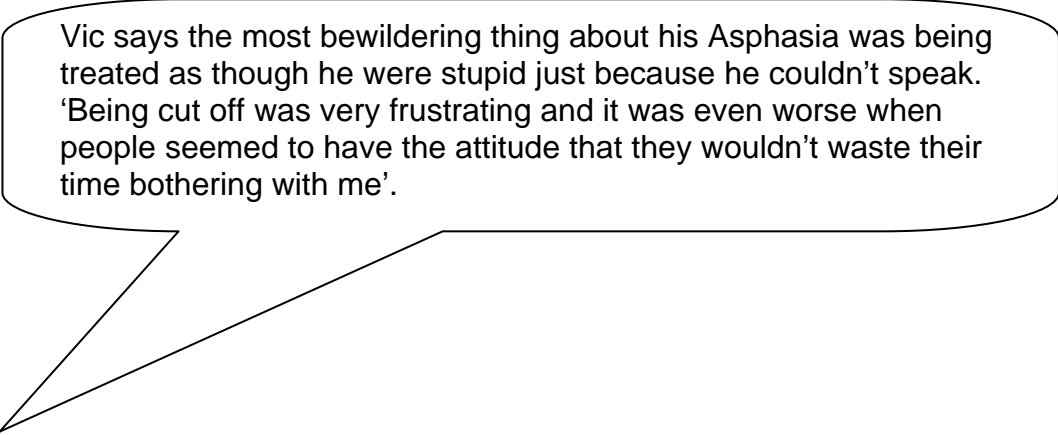
Some people with Asphasia will be aware of their communication problems, others will not.

How severe can it be? –

The severity of the problem can fluctuate from day to day or even hour to hour. A person may be able to communicate at one moment and not the next. The problem is often worse if the person is tired or anxious. It can therefore be hard for family and friends not to suspect the person of being lazy or contrary but it is important to remember that this is not the case.

'Lack of communication was hardest to bear'

Thoughts of a dysphasic person –



Vic says the most bewildering thing about his Asphasia was being treated as though he were stupid just because he couldn't speak. 'Being cut off was very frustrating and it was even worse when people seemed to have the attitude that they wouldn't waste their time bothering with me'.

Advice for helping someone with Asphasia

Carers, family and friends can help a person with Asphasia by following some simple tips.

- Accept and praise any effort to communicate
- Make sure you have the person's attention before speaking. Try to reduce noise and other distractions. Always face the person when you are speaking. Speak slowly and clearly but do not shout.
- Use familiar words whenever you can and avoid complicated sentences – but remember the person is still an adult. Allow 10-15 seconds for what you have said to be processed before repeating it.
- Use gestures. Encourage the dysphasic person to point. He or she can nod and shake the head, or use thumbs up and down for 'yes' and 'no'. You can also gesture – for example, when asking if the person wants tea, point to the kettle or mime drinking.
- Ask questions one at a time. Give the person time to answer and don't interrupt. Whenever possible, try to use questions that have a 'yes' or 'no' response. As the person improves, progress to questions with two choices, for example 'Would you like tea or coffee?'
- If you can't understand the person, don't pretend you can. Ask him or her to repeat it, to try to say it another way instead or use gestures.
- If you can understand what the person is trying to say, don't correct pronunciation or grammar.
- Work out signals as cues to help in conversation – for instance, a sign to use when the toilet is needed.
- Encourage opportunities to hear speech. Radio and television are useful in moderation. Short periods of socialising can be helpful; smaller groups are best.
- Use familiar photographs and sing familiar songs to encourage communication.
- Remind the person regularly of the progress made. Reassure the person that having Asphasia does not mean he or she is any less intelligent. Explain that his or her difficulties understanding and using language are because of the stroke.