An aphasia diagnosis is unplanned, unexpected, and frustrating, but it’s not hopeless. It’s a journey.

What to Expect When You’re Not Expecting Aphasia
There are **2 million** people living with aphasia.

**25-40%** of our country’s 1 million annual stroke victims acquire aphasia.

While most recover, as many as **40%** will have chronic aphasia.

Despite the frequency of the condition, a large number don’t know they have aphasia or how to explain it.

As your partner for the aphasia journey, we’ve incorporated helpful resources for caregivers and loved ones who are new to aphasia.

**Here is what to expect when you’re not expecting aphasia.**
What to Expect When You’re Not Expecting Aphasia

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What is Aphasia?

Aphasia is an acquired language disorder resulting from a stroke or brain injury. It affects a person’s ability to process, use, and understand language. Aphasia can cause frustration and stress for an individual living with it, and also for his or her caregiver. An aphasia diagnosis is unplanned, unexpected, and frustrating, but it’s not hopeless.

MILD TO SEVERE APHASIA
The severity of aphasia depends on the degree and location of damage to the brain. The greater the severity of the aphasia, the more limited the speech and language skills. Here is what to expect with mild to severe aphasia:

Mild aphasia:
- Individuals may have trouble understanding long messages
- Individuals may need a little extra time to understand and respond to spoken messages
- Individuals may have difficulty finding words to express or explain an idea
- Individuals may put words in the wrong order, or substitute the wrong word/part of a word when talking, for example, he or she may call a “table” a “cup”
- Individuals may have difficulty responding to questions on the spot

Severe aphasia:
- Individuals may have trouble understanding spoken utterances
- Individuals may be unreliable in responding to yes and no questions
- Individuals may not be aware of their own errors
- Individuals may use a combination of words and jargon that is not understood by others
- Individuals may have little or no speech
A speech-language pathologist (SLP) is a highly-trained health care professional who evaluates and treats speech, language, and cognitive impairments as well as swallowing disorders.

Although people often think of speech and language as the same thing, the terms actually have very different meanings—speech is the physical act of making sounds to communicate; language is the cognitive ability to form letters and words together into a sentence or phrase.

SLPs must be licensed and certified to treat patients by the American Speech-Hearing-Language Association (ASHA).

SLPs are also referred to as speech therapists, speech-language therapists, and clinicians.
If your loved one has suffered a stroke and is experiencing some language deficiencies, you may hear your health care professional describe the language loss as “Broca’s aphasia” or “Wernicke’s aphasia.”

To understand the type of aphasia your loved one may be facing, visit with your SLP or neurologist. They may classify your loved one’s language using one of the terms listed on the following pages.

<table>
<thead>
<tr>
<th>Anomic Aphasia:</th>
<th>Broca’s Aphasia:</th>
<th>Mixed Non-fluent Aphasia:</th>
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<tr>
<td>Anomic aphasia is the least severe form of aphasia. It’s a sensation often described as having a word on the tip of your tongue.</td>
<td>Broca’s aphasia is also referred to as non-fluent or expressive aphasia. This type of aphasia can be very frustrating because the individual knows what he or she wants to say but is unable to accurately produce the correct word or sentence. Someone with Broca’s aphasia may miss words like “it” and “is” and be limited to short statements.</td>
<td>Mixed non-fluent aphasia resembles a severe form of Broca’s aphasia because the individual’s speech is sparse and laborious. Unlike Broca’s aphasia, a person with mixed non-fluent aphasia may also have limited understanding of speech and not be able to read or write beyond an elementary level.</td>
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He or she usually understands speech well and is able to read adequately, but writing ability may be poor.

Keep in mind that a person’s initial presenting symptoms can change with recovery, and the classification of the aphasia may change. Check with your SLP or neurologist to confirm the correct type has been identified.
Aphasia is a communication and language disorder, not a reflection of one’s intelligence.

**Primary Progressive Aphasia:**
Primary Progressive Aphasia, also known as PPA, is a degenerative brain and nervous system disorder that causes speaking and language skills to decline over time.

An individual who is beginning to become symptomatic with Primary Progressive Aphasia may have trouble naming objects or may misuse word endings, verb tenses, conjunctions, and pronouns. Unlike actual aphasia, which is the result of brain damage, Primary Progressive Aphasia is a progressive type of dementia.

**Wernicke’s Aphasia:**
Individuals diagnosed with Wernicke’s aphasia are unaware that the words they are producing are incorrect and nonsensical.

He or she may have severe comprehension difficulties and be unable to grasp the meaning of spoken words, yet may be able to produce fluent and connected speech. Reading and writing are often severely impaired as well.

**Global Aphasia:**
Global aphasia, as the name suggests, refers to widespread language impairment. This is the most severe form of aphasia, and usually occurs immediately after a stroke in individuals who have experienced extensive damage to the brain’s language area.

A person with Global Aphasia loses almost all language function and has great difficulty understanding as well as forming words and sentences. Individuals who are suffering from Global Aphasia may only be able to produce a few recognizable words, understand little or no spoken speech, and be unable to read or write.
Navigating an aphasia diagnosis is difficult and full of questions. Lingraphica’s clinical team answers some of the biggest questions about the communication disorder:

Q: Who gets aphasia?
A: Aphasia is a communication disorder that occurs as a result of a stroke or brain injury. Because stroke and brain injuries can happen to anyone at any time, so can aphasia. Aphasia also results from dementia and age-related brain atrophy.

Q: What does aphasia feel like?
A: Many individuals with aphasia report that it’s like having a word on the tip of your tongue. Because the words are not processed as quickly as in an unimpaired individual, it’s as if others are speaking very quickly. Many also say it can be frustrating and challenging to explain thoughts or feelings because the words can be scrambled or jumbled. It can be difficult to understand what individuals with aphasia are saying.

Q: My husband had a stroke and many people are saying that he will eventually plateau in his recovery. Is this true?
A: One the most frustrating things for adults with aphasia is hearing from a health care professional that they’ve reached a “plateau” in their recovery. Often individuals first hear about the “plateau” from their physicians who, immediately after the onset of aphasia, tell families and loved ones what to expect. For years it was believed that any recovery would happen within the first six months. While many individuals make a full recovery from the initial symptoms of aphasia, as many as 40 percent develop chronic aphasia.

Research shows that adults with aphasia can continue to get better with ongoing therapy and practice. By practicing reading, writing, speaking, and listening on a daily basis, adults with aphasia can strengthen their skills. Determination and access to resources are the most important factors to regaining language skills after a stroke or brain injury.
Q: Does an aphasia diagnosis mean that someone’s intelligence is also affected?

A: Aphasia is a loss of language, not intelligence. It occurs because of damage in the left side of the brain, and the type of aphasia and extent of damage depends on precisely where in the left hemisphere the injury is focused. Depending on the location of the stroke or brain injury, an individual’s language skills may be intact. Because of this, it’s difficult to determine an individual’s cognitive level. However, the general consensus is that the person’s intelligence remains intact even if the language is impaired. Many people can still process thoughts and test well on other performance capabilities; they simply need alternative communication methods.

Q: I have aphasia and I have trouble speaking, but I can read and write. Is this normal?

A: Aphasia affects all modalities of language to some degree. Depending on the type and severity of aphasia, it can affect speaking, listening, reading, and writing.

Q: Can you get better?

A: The outcome of aphasia is difficult to predict, given the inconsistency of its symptoms and types. Generally, if you are younger or have less-extensive brain damage, your chances for improvement and recovery are better. In general, people with aphasia tend to recover their language processing skills more quickly than their speaking and writing skills. Recovery starts with lots of practice reading, writing, and speaking.

Meet our clinician

Lisa Haynes is a certified SLP and Alternative and Augmentative Communication (AAC) specialist. Lisa has years of experience as an AAC consultant, training clinical staff and caregivers. She also has several years’ experience supervising SLPs in a variety of settings. Today, she manages Lingraphica’s clinical programs and offerings. She is passionate about helping adults with aphasia.
Continuing Your Aphasia Journey

Learning and understanding an aphasia diagnosis takes time. Whether you have a language deficit or you’re the parent or caregiver of someone with a language deficit, we will help you find an effective solution to help you communicate. Our clinical team is here to guide and support you every step of the way.

Improvement is possible:
There are many different treatment options for people with aphasia. Research shows that aphasia treatment should be initiated as soon as possible following a stroke. Whether your aphasia journey includes ongoing speech therapy sessions, intensive speech programs, or online activities, we are here to help you.

Practice, practice, practice:
Improvement starts with the help of a great SLP. In the United States, more than 16,000 SLPs treat adults with speech disorders, including aphasia. These professionals navigate the challenges of trying to understand someone with a language disorder and they can provide functional tips and techniques for caregivers to communicate with their loved one. Learning these new ways to facilitate functional communication from an SLP will help your loved one begin to face life with aphasia.

Additionally, tools like mobile device applications, speech-generating devices, online speech therapy, and support groups can help your loved one strengthen his or her communication skills and regain confidence. They can also help your loved one find meaningful and helpful ways to share his or her wants and needs, personal information, and safety information; including information about pain or symptoms of illness.

Research-backed solutions

LINGRAPHICA offers a variety of research-backed solutions including:

• Speech-Generating Devices
• TalkPath Therapy online speech therapy
• TalkPath News
Find Support
There are hundreds of support groups, aphasia programs and practitioners, and online groups that can be beneficial to caregivers and individuals with aphasia.

Regardless of the approach you select to improve communication skills and decrease frustrations, remember that there is hope.

Individuals with aphasia can improve.
Lingraphica provides clinically relevant tools and services to help individuals with language and cognitive disorders connect with family, friends, and communities.

Working in partnership with clinicians and caregivers, our mission is to meet those individuals wherever they may be in their journey to improve or regain their communication skills.

Backed by nearly 30 years of experience and research, we provide speech-generating devices, language and communication apps, and online speech therapy.

We believe that all individuals with language and cognitive disorders need a lifetime of affordable therapy and practice. To achieve this, they need a committed, reliable, and knowledgeable partner who can guide, support, and encourage them on their journey.

That's where we come in.

**We are your partner for the journey.**