The association between naming difficulties, aphasia severity and demographic variables in nonfluent post-stroke aphasia

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Post stroke dysphagia management in a multidisciplinary team

ABSTRACT

Post-stroke dysphagia is a life threatening complication that occurs after a stroke, affecting approximately 50% of stroke survivors. It can result in severe difficulties in swallowing liquids and solid foods, leading to malnutrition, aspiration, and pneumonia. In the latest European Stroke Organisation guidelines, dysphagia was emphasised as a one of the primary complications that needs to be managed in order to avoid secondary complications. Because of the complex nature of post-stroke dysphagia, a multidisciplinary team consisting of a speech language pathologist, neurologist, nurse, physiotherapist, and nutritionist is required. Each member plays a different, but important role in treating and rehabilitating the patient. The aim of this study was to explore the role of each member of the team according to currently available data, as well as offer an example of a multidisciplinary team in our hospital. Key search words included "post-stroke dysphagia" and "multidisciplinary team". Recent data on this topic was collected from papers published between 2020 and 2023 that were archived in Scopus, PubMed, and Science Direct. The available literature stressed the importance of a multidisciplinary approach in order to achieve the best possible swallowing function and improve the patient's quality of life: an approach that is currently used in our clinic.

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The association between naming difficulties, aphasia severity and demographic variables in nonfluent post-stroke aphasia

ABSTRACT

Background: Naming difficulties are present in all people with aphasia (PwA), regardless of the type and severity of aphasia. Several studies have reported a significant association

between naming difficulties and aphasia severity (Saber-Moghadam et al., 2022). However, results linking naming difficulties and aphasia severity to demographic variables are contradictory (Johnson et al., 2019). This study aimed to determine the association between naming, aphasia severity, and demographic variables.

Methods: 30 PwA who suffered a left ischemic stroke and non-fluent aphasia were included in this study. There were 20 male and 10 female participants between the ages of 23 and 88 years and they were examined in the period from 1 to 72 months post-stroke. The entire battery of the Croatian version of the Comprehensive Aphasia Test (CAT-HR, Swinburn et al., 2021), was administered to all subjects. Data on the severity of aphasia based on the total score on the Language Battery and performance on the Naming subtest were extracted. Using nonparametric Spearman's Rho coefficient, the correlations between CAT-HR total score, naming, and demographic variables were analysed.

Results: The results showed that naming is highly correlated with aphasia severity, but there was no association of these two variables with age and time post-stroke.

Conclusion: Based on the strong correlation between naming and the severity of aphasia, as well as the lack of association with demographic variables, it seems that the naming abilities of people with non-fluent aphasia are more dependent on stroke related variables and overall aphasia severity than on demographic variables.

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Comprehension of proverbs in persons with TBI: case reports

ABSTRACT

Traumatic brain injury (TBI) leaves numerous consequences on cognitive, language, and communication abilities. TBI often leads to disturbances in comprehending figurative language, which can disrupt the communication process. The purpose of this study was to evaluate the ability of persons who have suffered TBI to understand proverbs in order to draw attention to figurative language/conversation abilities, which is a topic that is rarely investigated.

Method: The sample consisted of 4 subjects with TBI aged 22 to 29 years, who had completed 12 to 16 years of education. Subjects were tested between 4 and 9 months after the injury.

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