Aphasia Definitions

Aphasia is an impairment of language, affecting the production or comprehension of speech and the ability to read or write. Aphasia is always due to injury to the brain—most commonly from a stroke, particularly in older individuals. But brain injuries resulting in aphasia may also arise from head trauma, from brain tumors, or from infections.

Aphasia can be so severe as to make communication with the patient almost impossible, or it can be very mild. It may affect mainly a single aspect of language use, such as the ability to retrieve the names of objects, or the ability to put words together into sentences, or the ability to read. More commonly, however, multiple aspects of communication are impaired, while some channels remain accessible for a limited exchange of information. It is the job of the professional to determine the amount of function available in each of the channels for the comprehension of language, and to assess the possibility that treatment might enhance the use of the channels that are available.

Varieties and special features of aphasia

Over a century of experience with the study of aphasia has taught us that particular components of language may be particularly damaged in some individuals. We have also learned to recognize different types or patterns of aphasia that correspond to the location of the brain injury in the individual case. Some of the common varieties of aphasia are:

- **Anomic aphasia**: This is the most severe form of aphasia, and is applied to patients who can produce few recognizable words and understand little or no spoken language. Persons with Global Aphasia can neither read nor write. Global aphasia may often be seen immediately after the patient has suffered a stroke and it may rapidly improve if the damage has not been too extensive. However, with greater brain damage, severe and lasting disability may result.

- **Broca's aphasia ('non-fluent aphasia')**: In this form of aphasia, speech output is severely reduced and is limited mainly to short utterances of less than four words. Vocabulary access is limited and the formation of sounds by persons with Broca's aphasia is often laborious and clumsy. The person may understand speech relatively well and be able to read, but be limited in writing. Broca's aphasia is often referred to as a 'non-fluent aphasia' because of the halting and effortful quality of speech.

- **Mixed non-fluent aphasia**: This term is applied to patients who have sparse and effortful speech, resembling severe Broca's aphasia. However, unlike persons with Broca's aphasia, they remain limited in their comprehension of speech and do not read or write beyond an elementary level.

- **Wernicke's aphasia ('fluent aphasia')**: In this form of aphasia the ability to grasp the meaning of spoken words is chiefly impaired, while the ease of producing connected speech is not much affected. Therefore Wernicke's aphasia is referred to as a 'fluent aphasia'. However, speech is far from normal. Sentences do not hang together and irrelevant words intrude—sometimes to the point of jargon. In severe cases. Reading and writing are often severely impaired.

- **Anomic aphasia**: This term is applied to persons who are left with a persistent inability to supply the words for the very things they want to talk about—particularly the significant nouns and verbs. As a result their speech, while fluent in grammatical form and output is full of vague circumlocutions and expressions of frustration. They understand speech well, and in most cases, read adequately. Difficulty finding words is evident in writing as in speech.

- **Other varieties**: In addition to the foregoing syndromes that are seen repeatedly by speech clinicians, there are many other possible combinations of deficits that do not exactly fit into these categories. Some of the components of a complex aphasia syndrome may also occur in isolation. This may be the case for disorders of reading (alexia) or disorders affecting both reading and writing (alexia and agraphia), following a stroke. Severe impairments of calculation often accompany aphasia, yet in some instances patients retain excellent calculation in spite of the loss of language.