Contribution of constraint in communication therapy for persons with non-fluent chronic aphasia

M. Balaguer, X. De Boissezon
Service de Médecine Physique et de Réadaptation, Hôpital Rangueil, CHU deToulouse, Toulouse cedex 9, France

Keywords: Aphasia; Communication; Therapy; Constraint

Objective.– To assess the contribution of “constraint” in the communication therapy in persons with non-fluent chronic aphasia.

Methods.– We propose a comparative study of seven patients, divided into two groups according to the same protocol of intensive rehabilitation. The control group may use any means of communication, the other is “forced” to use only the verbal channel. We used both analytical and functional strategies to maximize linguistic and communicative aspects.

Results.– We do not find significant differences in post-therapy: although both groups improve their linguistic abilities. The evolution of communication scores is rather better to the “unconstrained” group.

Conclusion.– A more specific recruitment of patients would better target the constraint factor.

Further reading


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Further reading


patients referred for rehabilitation in acute care and rehabilitation specialist for burned over the period 2008–2013.

Results.-- Among the study population, main behaviours and psychiatric disorders are: addictive behaviours, chronic diseases like schizophrenia, bipolar disorder and depression. Their impact on the rehabilitation of patients is analysed.

Discussion.-- These results highlight the need for support teams psychiatry (psychiatrists, psychologists) for the drafting of care and monitoring of burned patients treated in rehabilitation cares.

Further reading

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High technology for aphasia rehabilitation
F. Tonello , C. Francesco , F. Tebaldi , A. Cantagallo*
BrainCare S.R.L., Padova, Italy
*Corresponding author.

Keywords: tDCS; Technology; Rehabilitation; Aphasia; Neuropsychology

Background.-- Linguistic functions as comprehension and production could be several damaged after a traumatic brain injury (TBI).

Objective.-- Our research focused on a single clinical case, 40 years aged woman with Broca’s Aphasia (slowed speech, anomia and agrammatism) in car accident TBI.

Methods.-- The patient’s rehabilitation was made with the use of high technology. In particular, transcranial Direct Current Stimulation (tDCS) applied to the fronto-temporal lobe was used to improve the ability of naming (daily sessions for 2 weeks for 3 cycles) and telerehabilitation was used to improve logical and grammatical analysis abilities (once a week for six months).

Results.-- The treatment leaded to improvement of linguistic functions, as resulted comparing the pre- and post-training neuropsychological assessment results, and of the patient’s communication behaviours.

Discussion.-- High technology could offer important tools for neuropsychological rehabilitation and future studies to create guidelines for clinical practice are needed.

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