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Examining the Effects of Increasing Lexical Retrieval Attempts in Tablet-Based Naming Therapy for Aphasia

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Abstract : Technology-based applications are increasingly being utilized in aphasia rehabilitation as a means of increasing intensity of treatment and improving accessibility to treatment. These interactive therapies, often available on tablets, lead individuals to complete language and cognitive rehabilitation tasks that draw upon skills such as the ability to name items, recognize semantic features, count syllables, rhyme, and categorize objects. Tasks involve visual and auditory stimulus cues and provide feedback about the accuracy of a person's response. Research has begun to examine the efficacy of tablet-based therapies for aphasia, yet much remains unknown about how individuals interact with these therapy applications. Thus, the current study aims to examine the efficacy of a tablet-based therapy program for anomia, further examining how strategy training might influence the way that individuals with aphasia engage with and benefit from therapy. Individuals with aphasia are enrolled in one of two treatment paradigms: traditional therapy or strategy therapy. For ten weeks, all participants receive 2 hours of weekly in-house therapy using Constant Therapy, a tablet-based therapy application. Participants are provided with iPads and are additionally encouraged to work on therapy tasks for one hour a day at home (home logins). For those enrolled in traditional therapy, in-house sessions involve completing therapy tasks while a clinician researcher is present. For those enrolled in the strategy training group, in-house sessions focus on limiting cue use in order to maximize lexical retrieval attempts and naming opportunities. The strategy paradigm is based on the principle that retrieval attempts may foster long-term naming gains. Data have been collected from 7 participants with aphasia (3 in the traditional therapy group, 4 in the strategy training group). We examine cue use, latency of responses and accuracy through the course of therapy, comparing results across group and setting (in-house sessions vs. home logins).

Keywords : aphasia, speech-language pathology, traumatic brain injury, language
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