Letters to the Editor

The Impact of Intensity of Aphasia Therapy on Recovery

To the Editor:

In a 2003 article in Stroke, Bhogal et al1 concluded intensive aphasia therapy (~9 hours of treatment per week for 11 weeks) had a greater impact on speech and language outcomes for aphasic stroke patients than less intensive treatment (~2 hours of treatment per week for 23 weeks). Findings from this article have been used to support the provision of intensive speech and language therapy, particularly by researchers examining the effects of constraint induced aphasia therapy (CIAT), a promising therapy approach based on intensive treatment.4–7 This letter encourages that the findings of Bhogal et al be interpreted cautiously.

Some of the information in this 2003 Stroke article is inaccurate. For example, the authors reported findings of a study by Marshall et al examining the effects of home treatment of aphasia by trained nonprofessionals.8 They stated that this study included 121 patients with aphasia, but it actually only had 37 patients. These were 37 (the home treatment group) of 121 participants from a study by Wertz et al9 comparing the effects of clinic, home, and deferred treatment of aphasia. Thus, the 37 patients are counted twice in this review article.

A second issue related to the intensity of therapy issue is that Bhogal et al did not include many studies that demonstrate the benefits of aphasia therapy that is not necessarily intensive. Representative examples are (1) a VA cooperative study by Wertz et al9 comparing the effects of individual and group treatment in which patients were given 8 hours of treatment per week for 44 weeks, (2) an article by Denes et al10 that examined treatment outcomes for globally aphasic patients receiving intensive or regular therapy, and other studies demonstrating the benefits of aphasia treatment over the long rather than the short term.12–15

Although most aphasia clinicians, including myself, would welcome empirical studies that supported the use of intensive therapy, no large aphasia treatment studies have been carried out in which patients randomly assigned to intensive and non-intensive treatment and outcomes were compared. Until this is done, any conclusions about intensive treatment being better than, worse than, or the same as non-intensive treatment are premature.

Disclosures

None.

Robert C. Marshall, PhD
Division of Communication Sciences and Disorders
University of Kentucky
Lexington, Ky, USA

The Impact of Intensity of Aphasia Therapy on Recovery
Robert C. Marshall

Stroke. 2008;39:e48; originally published online December 27, 2007; doi: 10.1161/STROKEAHA.107.504068
Stroke is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
Copyright © 2007 American Heart Association, Inc. All rights reserved.
Print ISSN: 0039-2499. Online ISSN: 1524-4628

The online version of this article, along with updated information and services, is located on the World Wide Web at:
http://stroke.ahajournals.org/content/39/2/e48

Permissions: Requests for permissions to reproduce figures, tables, or portions of articles originally published in Stroke can be obtained via RightsLink, a service of the Copyright Clearance Center, not the Editorial Office. Once the online version of the published article for which permission is being requested is located, click Request Permissions in the middle column of the Web page under Services. Further information about this process is available in the Permissions and Rights Question and Answer document.

Reprints: Information about reprints can be found online at:
http://www.lww.com/reprints

Subscriptions: Information about subscribing to Stroke is online at:
http://stroke.ahajournals.org/subscriptions/