

Answering the question 'Will I get better?'

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Speech pathologists lack a consistent approach to communicating post-stroke recovery information to patients, a University of Queensland study has found.

Speech pathologist and UQ School of Health and Rehabilitation Sciences Ph.D. student Bonnie Cheng said professional support was needed to develop guidelines on the best way for clinicians to talk about options with <u>patients</u>.

"Patients and families are often looking for hope when asking about <u>recovery</u>," Ms Cheng said.

"Aphasia—a language disorder that can occur after a stroke—causes difficulties with speaking, understanding, reading and writing that can be debilitating in <u>everyday life</u>.

"One in three stroke survivors have aphasia, and that can leave sufferers socially isolated and at risk of mental health difficulties."

The study surveyed 54 speech pathologists about a series of hypothetical aphasia prognosis delivery scenarios.

Ms Cheng said most clinicians felt the patient's emotional wellbeing, hopes and expectations and comprehension of information were key considerations when delivering a prognosis.

"Factors relating to the nature and severity of poststroke functioning, a patient's level of motivation, and the availability of social support were seen as most important for forming an aphasia prognosis," she said.

"However, speech pathologists' responses were varied not only in what they said but in how they framed their responses, using a range of expressions to communicate predicted outcomes in different ways.

"Prognosis responses included actual predictions of recovery, as well as other information about attributes and activities contributing to recovery.

"Information was often communicated through a combination of qualitative probability expressions such as 'probably' and 'likely'."

Ms Cheng said because aphasia recovery was unpredictable, and due to the delicate nature of these conversations, evidence-based guidance on prognosis delivery was needed.

"Current approaches to answering difficult questions about aphasia prognosis are reliant on experience and professional judgement," she said.

"Prognosis delivery is complex, intellectually demanding, and emotionally taxing and <u>speech</u> pathologists want more training and support for undertaking this task.

"The development of evidence-based guidelines for prognosis delivery in aphasia would be beneficial for <u>clinical practice</u>."

The study is published in *International Journal of Language and Communication Disorders*.



More information: Bonnie B. Y. Cheng et al. Prognostication in post?stroke aphasia: How do speech pathologists formulate and deliver information about recovery?, *International Journal of Language & Communication Disorders* (2020). DOI: 10.1111/1460-6984.12534

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