

What is Global Aphasia?

Many people with aphasia may begin with a global aphasia. As the most severe type of aphasia, global aphasia affects all language areas—reading, writing, speaking, and understanding about equally. Global aphasia may last for several days or months after a stroke. If a large area of the brain was damaged, global aphasia may last for a longer period of time. Usually, both Broca’s area and Wernicke’s area have been affected, but not always. The speech area damaged may also cause **apraxia**.

People with global aphasia may only say a few words, such as “no” or “hey” or “what”, or they may speak in “**stereotypies**”. Stereotypies are words or phrases that are said over and over with different intonation. Examples may be “ding da ding”, “I love you” or “something wonderful”.

If you imagine that speaking in stereotypies is like driving over a dirt road, the more you drive it, ruts develop and get deeper over time. If someone says the same words/phrases for everything over and over, the more ingrained those words and motor patterns become. Speech is then on a loop that is difficult to stop. You are constantly activating the same neural networks, thereby reinforcing it. **It takes time and intense work to get other words to come out purposefully and to decrease the stereotypies, but it can be done. It is possible to improve global aphasia, even if it’s been more than one year since the stroke.**

Progress with chronic (more than six months duration) global aphasia may seem very slow and not very noticeable, especially if therapy is only a few hours per week. But **comprehension can improve, apraxia can improve, awareness can improve – someone’s aphasia type and severity can change.** While the person may start with global aphasia, the brain swelling may decrease so that the person ends up with Broca’s aphasia, for example.

Progress with intensive treatment shows us that the stereotypies may get worse before they get better. This is because we are improving the person’s awareness and comprehension, so they know that they want to change what they are saying. But because the stereotype is overlearned, they have a hard time changing it for a while. So their speech may actually get worse because they know they are saying something they don’t want to say, they are trying to stop it, but need a lot of practice to overcome the patterns.

These videos show three examples of stereotypies and global aphasia in the same person.

The first video clip shows little speech during a picture description task. His speech is largely “all right” and “I know” with varying intonation.

The second clip shows that overlearned speech-motor patterns interfere with practiced sentences.

The third clip shows that with specific, contextual practice over time, he can learn new speech-motor patterns. The longer someone speaks in stereotypies, the harder it can be to overwrite those speech patterns with new words. **Continued practice is critical.**

Progress can still be made even after years of global aphasia, it just may take longer and require more effort. Each person with aphasia, even global aphasia, is so different from others with the same diagnosis. **Don't let a diagnosis of global aphasia in your loved one keep you from getting expert advice or treatment, we have the experience and the hope!**