# Measuring the verbal effectiveness of people with aphasia

No registrations found.

Ethical review	Positive opinion
Status	Suspended
Health condition type	-
Study type	Observational non invasive

# **Summary**

# ID

NL-OMON24038

**Source** Nationaal Trial Register

**Brief title** n/a

**Health condition** 

Aphasia

# **Sponsors and support**

**Primary sponsor:** Radboud University Nijmegen **Source(s) of monetary or material Support:** Radboud University Nijmegen, Zuyderland Medical Center (location Sittard) and Adelante (department of Rehabilitation in Zuyderland Medical Center, location Heerlen)

### Intervention

### **Outcome measures**

#### **Primary outcome**

1) Quantitative measure of verbal effectiveness (Ruiter, Kolk, Rietveld, Dijkstra & Lotgering,

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2011), based on experimentally adapted scenarios of the ANELT(Blomert, Koster & Kean, 1995)

2) Quantitative measure of verbal efficiency (Ruiter, Kolk, Rietveld, Dijkstra & Lotgering, 2011), based on experimentally adapted scenarios of the ANELT(Blomert, Koster & Kean, 1995)

#### Secondary outcome

Qualitative measure of verbal effectiveness (Comprehensibility A-scale) based on the original ANELT(Blomert, Koster & Kean, 1995)

# **Study description**

#### **Background summary**

A well-known test for measuring verbal functional communication in people with mild expressive aphasia is the Amsterdam-Nijmegen Everyday Language Test (ANELT; Blomert, Koster & Kean, 1995). Previous research has indicated that the construct validity of the ANELT can be further improved by substituting the (original) qualitative scoring procedure by a (new) quantitative one, which takes the number of essential information units. In comparison to the qualitative score, the quantitative score was found to be more sensitive to detect change in functional communication over time and it also allowed derivation of score of verbal efficiency, which is another aspect of functional communication (Ruiter, Kolk, Rietveld, Dijkstra & Lotgering, 2011).

As a follow-up on the study by Ruiter et al. the following further (experimental) adaptations to the ANELT were made: (a) some of the test items were replaced by ones which better represent daily communication settings, and (b) the essential information units to be expressed on each test item were determined on a larger group of non-aphasic speakers than was done in the 2011-study, thus including more (i.e. various) responses. The current study seeks to investigate whether these experimental changes further improve the methodological quality of the quantitative ANELT measure.

#### **Study objective**

Based on the results obtained in our previous study (Ruiter, Kolk, Rietveld, Dijkstra & Lotgering, 2011), we hypothesise that:

- The experimental changes to the scenarios and new quantitative scoring procedure of the Amsterdam-Nijmegen Everyday Language Test (ANELT; Blomert, Koster & Kean, 1995) lead to a more accurate estimate of the true scores of the verbal functional communication skills of people with mild expressive aphasia. More specifically, by reducing the SDs (SDs < 15.1) the 95% confidence intervals will decrease.

- The new quantitative score is more sensitive than the original qualitative one in detecting change in verbal effectiveness over time. There are two conditions that have to be met in order to investigate responsiveness: the aphasic speakers should improve verbal effectiveness over time (investigated in the current study), and non-linguistically impaired speakers should not (investigated in another study).

- Quantification of the number of essential information units produced in the ANELT yields at least the same inter-rater agreement at the current qualitative rating scale.

#### Study design

Two, with a time interval of 8 weeks

#### Intervention

n/a

# Contacts

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# **Eligibility criteria**

# **Inclusion criteria**

- Aphasia based on clinical judgement of a speech and language pathologist;
- Male and female;
- Age between 30 and 80 years old;
- Native speaker of Dutch;
- 6 weeks to 6 months post-onset of a LH stroke;
- Testable with:
- (a) Comprehensive Aphasia Test (CAT-NL; Swinburn, Porter & Howard, 2014)

(b) Amsterdam-Nijmegen Everyday Language Test (ANELT; Blomert, Koster & Kean, 1995)

### **Exclusion criteria**

- Prior stroke;
- Aphasia caused by tumor or trauma;
- A c-score of 3 (or below) at the CAT-NL subtests 'comprehension of spoken words', 'comprehension of spoken sentences', and 'comprehension of spoken paragraphs';
- (Even with visual aid) profound visual perceptual disorders;
- (Even with hearing aid) profound hearing deficit;
- Intellectual disability;
- Neurodegenerative diseases;
- Speech disorder (i.e. less than 90% intelligible speech output)

# Study design

### Design

Study type:	Observational non invasive
Intervention model:	Parallel
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

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# Recruitment

NL	
Recruitment status:	Suspended
Start date (anticipated):	01-03-2018
Enrollment:	20
Туре:	Anticipated

## **IPD** sharing statement

Plan to share IPD: No

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Fthics	review

Positive opinion	
Date:	08-09-2016
Application type:	First submission

# **Study registrations**

### Followed up by the following (possibly more current) registration

No registrations found.

# Other (possibly less up-to-date) registrations in this register

No registrations found.

# In other registers

**Register** NTR-new NTR-old Other **ID** NL5861 NTR6041 METC : 14-N-143 METC Z

# **Study results**