An explorative study of the oral language production difficulties in Arabic speaking aphasia patients in the Netherlands.

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The aim of the study is to answer the following questions:On which measures do patients with aphasia seem to differ from controls matched on age and country of origin, in the analysis of the spontaneous speech according to the guidelines of the ASTA...

Ethical review	Approved WMO
Status	Recruiting
Health condition type	Central nervous system vascular disorders
Study type	Observational non invasive

Summary

ID

NL-OMON35165

Source
ToetsingOnline

Brief title
Oral language production difficulties in Arabic Aphasia.

Condition

- Central nervous system vascular disorders

Synonym
Aphasia after CVA, language problems after a stroke

Research involving
Human

Sponsors and support

Primary sponsor: Slotervaartziekenhuis
Source(s) of monetary or material Support: geen

Intervention

Keyword: aphasia, Arabic, ASTA, language production

Outcome measures

Primary outcome

The difference between the test group and the control group will be based on

the following linguistic measures of the ASTA:

- The amount of: nouns, lexical verbs, repetitions, minimal responses,

neologisms, echolalia, stereotypes, semantic and syntactic paraphasias.

- The diversity (type-token ratio) of: nouns and lexical verbs.

- The mean length of utterance (MLU)

- The percentage of correct utterances.

- The finiteness index

- The amount of clauses.

In addition, while analysing the language samples, special attention will be

paid to measures specific for the Arabic language, which may differ

significantly between the two test groups.

Secondary outcome

N.A.

Study description

Background summary

When diagnosing and treating aphasia in Arabic speaking patients, the means available are extremely limited. Mainly, aphasia is diagnosed based on the

information given by the family members of the patiënt and the observations of the (Dutch-speaking) speech therapist. When possible, a Dutch test may be translated into Arabic, or the Bilingual Aphasia Test (El Abidi & Mimoeni, 1987, translated from the English and French versions, Paradis, 1987) may be used to give an indication of the deficits, if there is an Arabic-speaking therapist available. Simply translating a language test is, however, not sufficient for the reliable testing of the language abilities. We know, for a fact, that the semantic and syntactic structures can differ greatly between languages. Besides that, the semantic knowledge between cultures may differ. So what is needed, is a test based on the Arabic language and the linguistic problems that may arise in Arabic.

There has, however been very little research to the language problems in Arabic. A few studies of the morfo-syntactic disorders (Mimouni & Jarema, 1997), and the reliability of the shortened and translated Akense Aphasia Test (AAT, Graetz, De Bleser & Willmes, 1992) (van der Meij, 2010) have been extecuted, but the number and size of these studies is small. What we can tell is that the AAT was proven unreliable for the diagnosis of aphasia, due to the variables mentioned above.

Thus, a logical course of action is to investigate the difficulties occuring in Arabic aphasia. From there, a reliable test may be produced in the future, to be used (inter)nationaly. We would like to take this first step by investigating the spontaneous speech production of Arabic-speaking aphasic patients, compared to controls of a similair age and country of origin, using the guidelines of the ASTA; a Dutch guideline for analysing the spontaneous speech in aphasia (Analyse van Spontane taal bij Afasiepatiënten, Boxum, van der Scheer & Zwaga, 2010). Because analysing the spontaneous speech uses the language that is already there (unlike standard tests which may test a linguistic function that is non-existent in the Arabic language, or might overlook other functions), the ASTA enables us to analyse the Arabic speech, even though it's a Dutch test. Besides, using the ASTA, it will be possible to test for additional linguistic measures, which are used specifically in Arabic.

This study will focus on the comparison of the spontaneous speech of people with and without aphasia. Herein the scores of the controls will function as an indication of a norm, which may be used as a foothold for other studies in this area.

Study objective

The aim of the study is to answer the following questions:
On which measures do patients with aphasia seem to differ from controls matched on age and country of origin, in the analysis of the spontaneous speech according to the guidelines of the ASTA?

Sub questions:

- Using the ASTA in it's current form; is it possible to analyse the spontaneous speech in Arabic speaking aphasic patients?
- Which measures seem to be suitable for the analysis of language production deficits in Arabic speaking aphasic patients?
- Which additional (Arabic language specific) measures seem to be needed for the analysis of language production deficits in Arabic aphasic patients?

Study design

The spontaneous speech of two testgroups, a patient and a control group, will be aquired and analysed after investigation of the (premorbid) language proficiency in Arabic and other languages. The investigation of the language proficiency will take place by means of a questionare regarding the languages spoken (at home), the age of aquisition of the languages, and the language forms used (verbal versus written), among others. When it is not possible for the subjects to fill in the questionare independently, help (from family or the investigator) will be offered.
After filling in the questionaire an interview of about half an hour will follow. In this interview, the subjects will be stimulated to speak about daily matters such as hobbies, family, and work, according to the standard interviewing procedure of the ASTA.

Study burden and risks

N.A.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

CVA in the left hemisphere, with a mild aphasia as a result.
Right handed
The mother tongue is (Maroccan) Arabic.
The language used at home is Arabic.

Exclusion criteria

The existence of severe hearing problems or other problems (non-related to the aphasia) that hinder the communication.
The premorbid existence of language disorders.
The premorbid existence of neurological disorders.
The existence of an CVA in the right hemisphere.
The aphasia ia so severe that communication on (short) sentence level is impossible.
The existence of a severe dysarthria or verbal apraxia, thus rendering the language sample non-transcribable.

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial

Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Diagnostic

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	01-12-2011
Enrollment:	30
Type:	Actual

Ethics review

Approved WMO

Date:	18-08-2011
Application type:	First submission
Review commission:	METC Slotervaartziekenhuis en Reade (Amsterdam)

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	ID
CCMO	NL37739.048.11