

Electrophysiological Correlates of Phonological Processing in Aphasia: A case report

Annelies Aerts¹, Patrick Santens², Robert Hartsuiker³, Hans Hallez⁴, Miet De Letter⁵

¹Dept. of Internal Medicine, Ghent University, ²Dept. of Neurology, Ghent University Hospital, ³Dept. of Experimental Psychology, Ghent University, ⁴Dept. of Electronics and Information Systems, Ghent University, ⁵Dept. of ORL and Logopaedic-Audiologic Sciences, Ghent University

Background

Electrophysiological research using Mismatch Negativity

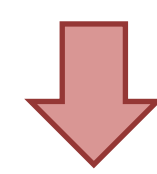


Deficient processing of consonant contrasts in nearly all types of aphasia^[3]



Features “voicing” and “place of articulation” most vulnerable^[3]

↳ MMN delayed, distorted or even absent (standard between 150 – 250 ms)^[3]



Auditory comprehension problems based on phonological input problems!^[3,4]

Functional plasticity

Reorganization of language in homotopic areas of the right hemisphere after stroke^[1,2]:

↳ as bilateral activation

↳ as shift to contralesional hemisphere



Better restitution without shift to contralesional hemisphere!^[1,2]

Method

Subject

- 68 year old right-handed woman with Broca aphasia
- Ischemic stroke in left insular area + area left middle cerebral artery with involvement of Broca area

Language test battery

- AAT
- PALPA (subtests phonological input)

Electrophysiology (EEG)

- Pre-attentive oddball paradigm (MMN)
- 3 different sets of stimuli auditory presented
- Investigating processing of 3 distinctive features:
 - Voicing
 - Manner of articulation
 - Place of articulation

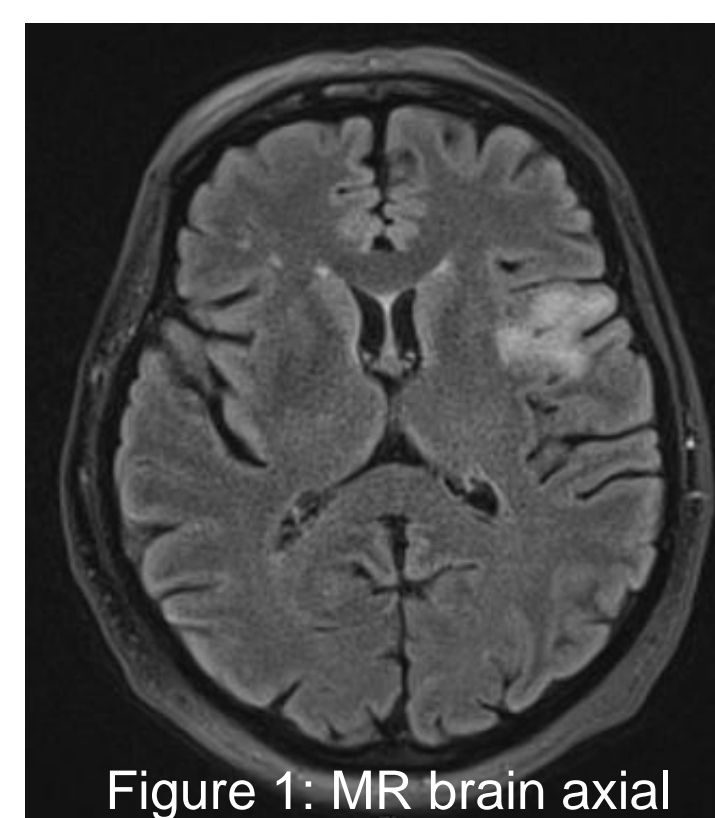


Figure 1: MR brain axial

Results

Aachen Aphasia Test (AAT)

No abnormal scores for auditory language comprehension

→ Auditory word comprehension: 29/30 (pc. 95)

→ Auditory sentence comprehension: 29/30 (pc. 95)

Psycholinguistic Assessment of Language Processing in Aphasia (PALPA)

Still reveals lower scores for auditory discrimination!

→ PALPA 1: 64/72 (M: 70.05; SD: 1.64; Range: 66-72)

→ Feature “place” most affected: 7/12 (M: 11.33; SD: 0.75; Range: 9-12)

Electrophysiology (EEG)

- Three MMN’s were present: either delayed, attenuated or with changed distribution
- MMN for “place” confirms result on PALPA 1!
 - latency 208 ms BUT shift to right hemisphere!

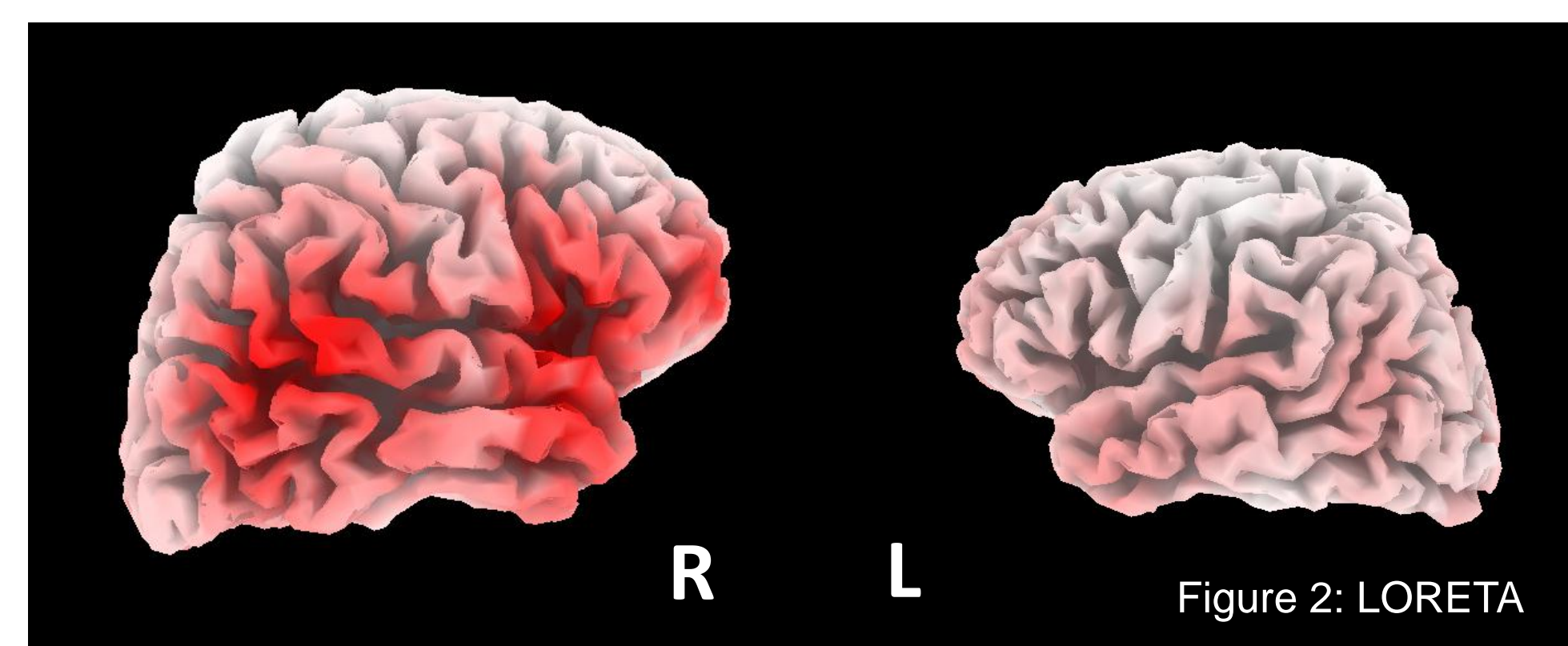


Figure 2: LORETA

Conclusion + discussion

This case report demonstrates:

- 1) How electrophysiology can reveal **contralesional activation** when processing a particular **distinctive feature**
- 2) How this method can be a valuable supplement to logopaedic examination by:
 - Making it possible to investigate **subtle comprehension problems**
 - Making it possible to formulate a **prognosis regarding recovery**
- 3) Therapeutic implications:
 - Focus on **phonological component** that is causing the contralesional shift in order to **impede activation of right hemisphere**

References

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