1. Glasnost in Aphasiology: On Opening Up Systems

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In chapter 4 of this volume, Rosenbek reminds us, "It's a poor sort of memory that only works in reverse." He has also observed that there is no substitute for history. This article, in part, is one of memory and of history. Both have their own stories to tell. Although time doesn't ravage as ruthlessly as disease, it leaves its marks and evokes its changes. But to remember is not necessarily to admit loss and make way for death. It can also celebrate, predict, and hope. When all else fails, there is nothing wrong with hope.

BEGINNINGS

Well after the middle of the 20th century, the two revolutionaries shown in Figure 1.1, President Mikhail Gorbachev and Dr. Bruce E. Porch, created *glasnost*—an environment where matters are presented openly and within hearing, and are open to comment. Porch either preceded or followed Gorbachev. Or it could have been the other way around. Nevertheless, similarities between the individuals and the events they inspired abound. Gorbachev has said, "Etogo nelzja vymyt," which means, "This thing won't wash off." Similarly, Porch observed, "Eto v spravocnike," which means, "It's in the manual." Today, Gorbachev is attempting *perestroika*, an effort to "build over" into something new. Twenty years ago, Porch built something new when he invited a motley group to the first Clinical Aphasiology Conference (CAC) in Albuquerque, New Mexico. Today, Gorbachev is recognized as the leader of the Warsaw Pact, and Porch is known as the leader of the *PICA* Pact.

Traditionally, graduate students are not taught to create things. They are taught to tear things apart. For some reason, Porch did not learn that

Figure 1.1. Dr. Bruce E. Porch *(left)* and President Mikhail Gorbachev created *glasnost* in their respective systems.

lesson during his graduate education. He emerged as he entered, creative. I admit that some of his creativity has escaped our understanding. For example, his move from California to the Southwest was followed by his arcane move "Queen's pawn to Albuquerque, New Mexico." Nevertheless, he quickly became the Arroyo Rogers of his arid environment and, as he put it, "girdled his lions" (an obscure phrase that seems to imply feline foundation garments) to take on the eastern establishment, specifically the Academy of Neuropsycholinguistic Aphasiology and Token Speech Therapy. Those of us who gathered in Albuquerque in 1971 remember Porch's early challenge, "They don't scare me none. They puts their pants on one arm at a time, just like the rest of us." While this observation has made a greater contribution to dressing apraxia than it has to aphasiology, his intention was clear, and we answered, "Bruce's right! Let's ride." And we did.

Porch's challenge established the classic experiment in how one studies aphasia by comparing the existing view, the control group, with that of the new CAC, the out-of-control group. Like Donald Barthelme's Wapituil, the groups had similarities, and they had differences. For example, the control group had many types of aphasia; the CAC, at that time, had one. Each group acknowledged a right and a left hemisphere, one of each. A major difference was that the sex life of the control group consisted of a single experience, which they thought about for a long time.

It took a while for the CAC to find its personality. Early CACs resembled Buffett's (1989) description of Jimmy Stewart's attempts to keep June

Allyson happy pretty much through the whole movie. When I try to explain what occurs at today's CAC, I usually allude to historical figures for comparison—Cleopatra, Nero, or Malcolm Forbes. In fact, as we begin this year's gathering, you can see a faint glow on the distant horizon—perhaps the fires in the outer villages, where the celebrations of last year's CAC are just winding down. It did not take CAC long to resemble the relationship between Butch Cassidy and the Sundance Kid. It became what we call in the West "a real wingding," with pink bananas and few survivors. Butch and Sundance were pals. What are pals for?

THE PRESENT

Every age is an awkward age. CAC at 20 is not CAC at 1. In 1970, as Buffett (1989) observed, we ate a lot of dead animals. Today, we eat more dead plants. We have developed some habits that may be of interest only to the habitual. CAC addicts talk about past conferences for hours without boredom, embellishing the ordinary with the imagination of time. CAC has a tradition, and it's important. Tradition is often the reason we carry on when there are so many reasons not to. Tradition is also something that reminds us why we are here. Porch's form of *glasnost* opened up the system. It gave CAC as many yesterdays as anybody, and I suspect it will provide some kind of tomorrow. Because, as Efron (1990) reminds us, until you open up a system, you never know what the problems are. Thus, I also suspect, CAC has as many problems to solve as it has yesterdays.

Briefly, I will discuss three examples of the problems that emerged when the system was opened up—relationships that no longer seem to exist, whether what aphasiologists do for aphasic patients does any good, and nosology. I realize that this may seem like D. J. Vu; have we played this record before? That's OK, because 20 is old enough to begin repeating ourselves.

RELATIONSHIPS

Some relationships no longer exist. Dr. Audrey Holland and Coach Mike Ditka, shown in Figure 1.2, were undergraduate classmates at the University of Pittsburgh. In an English literature class for physical education and speech pathology majors, they developed a common interest in *Bambi.* The relationship, however, ended at graduation. Coach Ditka has followed his interest in bears, and Dr. Holland became intrigued by bovines.

Figure 1.2. Dr. Audrey L. Holland and Coach Mike Ditka, Dr. Holland on the left, were undergraduate colleagues at the University of Pittsburgh. This relationship no longer exists.

Other relationships have dwindled. When CAC was young, we believed that aphasia had a rapid onset, it erupted, and it resulted from a damaged cortex. Today, we entertain the notions that aphasia can creep (slowly progressive aphasia) and that it can result from downstream destruction (subcortical aphasia). Both of these possibilities, if correct, will influence the way we think about and manage folks we call aphasic. For example, how do we differentiate slowly progressive aphasia from dementia, another disorder that creeps? And, as Duffy (1987) asked, what is the course of slowly progressive aphasia, what is its prognosis, and how should it be managed? Similarly, suggesting that a subcortical lesion can result in aphasia requires proof that there are no contributing upstream problems—cortical damage or large vessel disease (Weinrich, 1987). Also, we must acknowledge Metter and his colleagues' evidence (1984) that the geographic location of a lesion must be differentiated from its functional influence on other areas of the nervous system. Perhaps this is what John Hughlings Jackson (1874) had in mind 110 years earlier when he observed: "To locate the damage which destroys speech and to locate speech are two different things." Opening up a system does challenge what we thought we knew.

Some have suggested that we should do what we do well. Samuel Clemens and Dr. John C. Rosenbek, shown in Figure 1.3, are two of these. Clemens said, "Write what you know about." Rosenbek said, "Find out

Figure 1.3. Samuel Clemens and Dr. John C. Rosenbek, Dr. Rosenbek on the right, made similar observations on knowing and writing.

about something, then write about it." His challenge (Rosenbek, 1979) to the CAC in 1979—spend enough time with a cherished belief to find out whether the affection is warranted—has not met with an overwhelming response. In the same way, we might wonder whether we have become very good at something that is not terribly important. We have demonstrated that we can change aphasic patients' behavior, but we have not demonstrated whether the change is of sufficient magnitude to warrant the effort. Moreover, I wonder whether our patients are convinced that the way we measure change is actual change size. Opening up the system turned our attention from treating patients as interesting to treating patients. We have gotten to know a whole lot about aphasia, but there is a good deal more we need to know about aphasic patients.

Finally, Figure 1.4 indicates why Dr. Leonard L. LaPointe is called "Chick." Similarly, we agree to call this thing we gather to discuss *aphasia*, but we do not agree on what *aphasia* is. A commonly accepted definition continues to elude us, and few researchers provide a definition in their reports that influences what we do. This is probably important, because Albert, Goodglass, Helm, Rubens, and Alexander's (1981) definition of aphasia, "a disorder of language due to brain damage," would include dementia. Darley's (1982) definition of aphasia, ". . . not attributable to dementia," would not. Further, Schuell, Jenkins, and Jimenez-Pabon (1964) and Darley (1982) find aphasia only in people who have suffered disruption in *all* language modalities. Goodglass and Kaplan (1983), Damasio (1981), and Albert et al. (1981) find aphasia in people who have

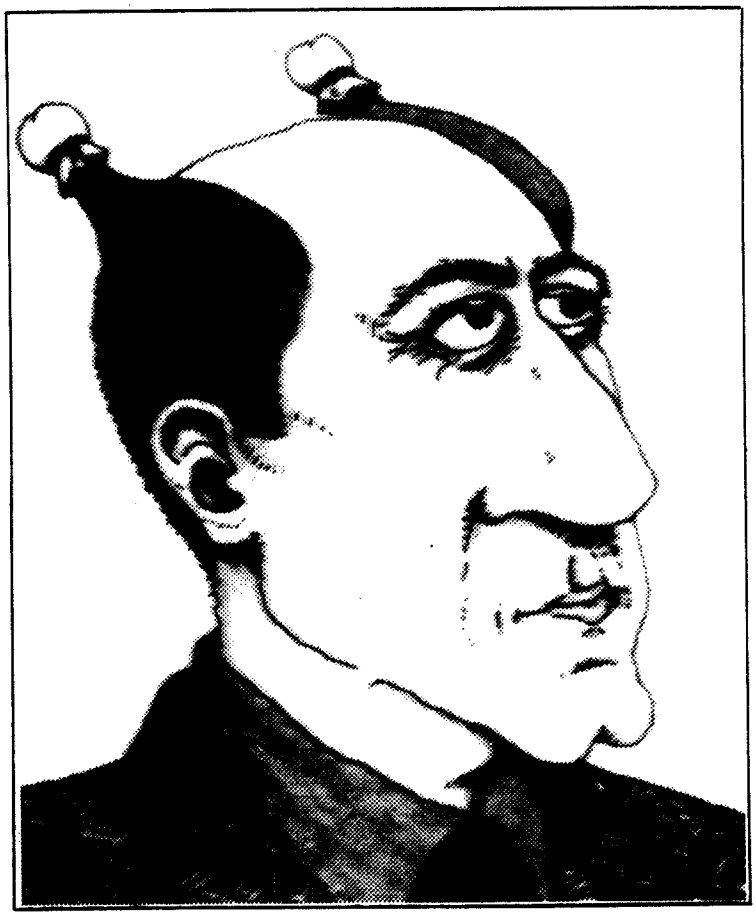

Figure 1.4. Empirical evidence demonstrating why Dr. Leonard L. LaPointe is called "Chick." Reprinted by permission of Recycled Paper Products.

suffered disruption in *one or more* language modalities. This *all* or *part* dichotomy can make one person's aphasia another person's alexia, agraphia, or apraxia of speech. McNeil (1989) discussed the need for a definition of aphasia in a paper presented to the Academy of Aphasia. The response was underwhelming. Silence permeated the discussion session and suggested a convention of the akinetically mute.

The system has been opened, and the problem is whether we are talking about the same thing. It is not important that we agree. It is important that we communicate. A start would be to meet Brookshire's (1983) requirements for descriptive data for the patients we report on. If the author's definition is absent, Brookshire's requirements would, at least, permit the reader to infer one. The word *definition* comes from *defino*—I enclose within limits, I fix, I finitize. Once something has been defined, it is like food: We prepare it and feed on it, and we require it to nourish us.

THE FUTURE

CAC has explored the brain and behavior for 20 years, and we might ask whether we are running on empty. I don't think so, but we may want to turn our attention to the plots of CAC stories to come. At 20, CAC may want to ponder what it is and what it would like to be, and to derive a coherent vision of itself.

In all likelihood, we will continue to try to get things right. It's strange how simple things in life go on, while we become more difficult. We know that there are icebergs of which we have explored only the tip. There has been honor and kindness among CAC participants, but neither should prevent our ideas and results from being judged. I hope that we will continue to bring what we think we know before a jury of our peers, and that they will be arduous in their deliberations. Wallace Stegner (1989) observed, ". . . minds grow by contact with other minds, the bigger the better, as clouds grow toward thunder by rubbing together." This may be the essence of the CAC: the bringing together of bright young people and experienced researchers and clinicians in a community of scholars. If we are any good at all, some day we can wrap ourselves in a mantle of respectability, because we have earned it.

So, is it CAC from here to infirmity or eternity? It probably is the latter, because, as Saroyan (1943) reminds us, "Nothing good ever ends." Porch opened up the system, and time has lurched forward. Some things have changed, and part of the past has lost its grip. Our task is to keep the wall of history open to provide those who follow a look at the future's present. Today's fires, like yesterday's, burn to smoke. I cannot imagine what CAC at 40 will be. The participants may have one type of aphasia, or they may have many. I do hope that if they have only one sexual experience, they will think about it for a long time.

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