Critical Review: Effectiveness and generalization of treatment methods in persons with word finding deficits

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Word finding deficits are one of the most common and often debilitating issues following a stroke. Despite the high incidence rate, researchers have yet to reach a consensus on the most effective treatment. This critical review examines the effectiveness and generalization of various word finding treatments in patients with aphasia. A

participant in which to measure treatment gains. The outcome measure of naming accuracy is directly related to the research question and the treatment method and is therefore considered an appropriate measure. The researchers tried to ensure treatment effects were not limited to the stimuli by alternating treatment type and using two different stimuli control sets and by recording the percentage of correct responses at each session to measure change over time. Excellent levels of unit by unit agreement ratio provided evidence of reliability of treatment and data probes.

The researchers used visual interpretations of graphs for analysis and number of correct responses to determine naming ability. Statistical evidence was therefore not reported, and although this does not allow for comparison to other studies or treatment methods, it is acceptable for this type of study.

Despite weaknesses in the study such as a small sample size, a single variable baseline and no statistical data, there is a moderate level of evidence provided which lends support for the effectiveness of word finding treatments, especially those involving personalised cueing methods.

A study conducted by Cameron, Wambaugh, Wright and Nessler (2006) investigated a combined semantic/phonologic cueing method on story retell and discourse tasks. Employing a multiple baseline, single-subject design, five participants were asked to complete several story retell tasks for analysis of production of trained words in discourse and provide several samples of connected speech to assess generalization effects.

semantic/phonologic cueing treatment did result in slight improvements in naming ability, however it did not generalise to untrained items at any of the post treatment probes.

The selection criteria of the participants was very detailed and included gender, months post onset, language, education, absence of neurological problems, health and mental status, and hearing. As with the previous studies, there is a large range of the months post onset of the participants. However, with the inherent limitations of the population, the researchers did attempt to control for many variables.

The researchers provided rationales for the measures they were using and reasoning for treating word finding deficits in connected speech. One inherent problem with the story retell measure is that it has never been used, nor was it designed, as a measure for word finding abilities. Also, the treatment was administered in a clinic environment which is not natural and may not reflect the true ability of the participants. The m 1 110.54 193.46 Tm[1)-9(k)6(ed)-7()-2(to)-4()-2(co)0 1 1ed5lso,b8 deficich to nt ph of the participants.