Critical Review:

What is the evidence that melodic intonation therapy is effective at rehabilitating expressive language in p with severe non-fluent aphasta?

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This critical review examines the efficacy of unmodified melodic intonation therapy (MIT) at rehabilitating expressive language in patients with severe non-fluent aphasia. Three articles including two single-subject AB designs and a parallel group Random Control Trial design are reviewed. Overall, the evidence gathered from this review is suggestive that MIT is effective at improving expressive language in patients with severe non-fluent aphasia. Recommendations for clinical practice and future research are provided.

Introduction

Melodic Intonation Therapy (MIT) is a speech and language rehabilitation strategy which entails altering the prosody of phrases and sentences by creating simple pitch, rhythm, and stress patterns. It is a structured technique that can be delivered to a variety of neurogenic conditions, however it is most commonly used to rehabilitate expressive language abilities in people with non-fluent aphasia. In the unmodified protocol, patients repeat prosodically-altered phrases that are verbally presented by the clinician in order to improve the patientÕs fluency in connected speech (Zumbansen, Peretz, & Hebert, 2014). An additional

* This paper was created as a required assignment for the CSD9639 Evidence Based Practice for Clinicians course at Western. While it has been evaluated by course instructors for elements of accuracy and style, it has not undergone formal peer-review. The primary aim of this systematic review is to determine the efficacy of traditional MIT at rehabilitating expressive language in patients with severe non-fluent aphasia. Since it remains unclear how the underlying mechanisms of this therapy benefit of these studies impossible, and the claim that traditional MIT was implemented cannot be verified. Furthermore, although the participants were matched in terms of aphasia type and severity, the single-subject design of each of the reported studies means the findings may only be generalized to other patients with similar pre-treatment profiles.

Overall, this study provides equivocal evidence that