

Critical Review: Is Melodic Intonation Therapy (MIT) Effective at Treating Non-Fluent Aphasia, According to Recent Studies?

Is Melodic Intonation Therapy (MIT) Effective at Treating Non-Fluent Aphasia, According to Recent Studies?

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Non-fluent aphasia typically results from damage to the language regions in the left hemisphere of the brain and leads to a presentation of expressive language difficulty. Melodic Intonation Therapy (MIT) is one possible treatment of non-fluent aphasia, aiming to capitalize on the musical aspects of speech, such as melody and rhythm, in order to engage regions in the right hemisphere of the brain that can support language. This paper aims to update and re-evaluate the current state of the evidence on the effectiveness of MIT. A variety of computerized databases and search tools were used to search for articles, using the following search terms: Aphasia, Non-fluent. Melodic Intonation Therapy, Intervention. Articles selected for inclusion in this review were limited to clinical trials and case studies examining the effectiveness of MIT or adapted MIT. Papers evaluated in this review included four case studies One control trial and two randomized control trials. Results indicate that MIT may be an effective therapy for treating non-fluent aphasia. The evidence is suggestive, however, higher level evidence is needed. In presentations of non-fluent and B sias, MIT or modified versions of MIT may be considered on a case, by case basis as a possible treatment.

Introduction

Aphasia is a language disorder that can occur following stroke or head injury. It has two subtypes: fluent aphasia (fluent production of verbal expression, but with little meaning), and non-fluent aphasia. Non-fluent aphasia is characterized by expressive language difficulties (little or no verbal production), word finding difficulties and agrammatism.

Non-fluent aphasia typically results from damage to the language regions in the frontal cortex in the left hemisphere of the brain, often involving an area called has been suggested that homologous language regions in the right hemisphere could be recruited to help support

Selection Criteria

Articles selected for inclusion in this review were limited to clinical trials and case studies examining the effectiveness of MIT or adapted MIT. Only articles available in English between 2000 and 2017 were included.

Data Collection

Papers evaluated in this review included **four case studies**: Baker, F.A. (2000), Hough, M. S. (2010), Wilson, S. J., Parsons, K., & Reutens, D. C. (2006), and Zipse, L., Norton, A., Marchina, S., & Schlaug, G. (2012); **One control trial**: Schlaug, G., Marchina, S., & Norton, A. (2008); **and two randomized control trials**: Conklyn, D., Novak, E., Boissy, A., Bethoux, F., & Chemali, K. (2012), and Van der Meulen, I., Van de Sandt-Koenderman, W. M. E., Heijenbrok-Kal, M.,

References