

What does speech and language therapy consist of?

Speech-language pathologists can help stroke survivors learn to reuse language or find other ways to communicate. What kind of therapy you need depends on your particular communication problems.

Many therapies are available to help stroke survivors with aphasia. Most stroke-related aphasia improves within 10 weeks, and can continue to get better for 18 months or more with therapy. Some recent studies suggest that short-term, intensive therapy is more effective at improving communication skills than therapy spread out over a longer period.²

The basics of treatment for aphasia include practicing simple drills to retrain your brain and muscles to speak, such as repeating the therapist's words, naming objects, and explaining the purpose of an object. You may also do simple reading and writing exercises and practice following directions. As you improve, your speech-language pathologist may coach you through basic conversations and rehearse common situations to improve your ability to communicate with confidence. One helpful technique is learning prompts or cues to remember specific words.

There are several possible causes of swallowing problems (dysphagia) after stroke. Your swallowing reflex may be delayed, or you may have problems moving food with your tongue. Your speech-language pathologist can identify the cause of dysphagia using noninvasive imaging tests and design therapies to deal with the problem. You may do exercises to strengthen the muscles used for chewing and swallowing. Sometimes simple changes such as having a better posture while eating, taking small bites, and chewing slowly can make a big difference.

If you are having problems with dysarthria, your speech-language pathologist will give you exercises to strengthen the muscles needed for speaking. If the muscle problems are too much to overcome, however, there are ways other than speaking to communicate exactly what you mean. Speech and language therapy can teach stroke survivors who have continuing problems speaking or reading other ways to communicate, such as symbol boards or American Sign Language. There is also a wide variety of assistive devices and computer programs that can make communication easier. Examples include computer software that can help you practice your speech at home, voice output communication aids (VOCA) that can speak for you, and

programs that can read text aloud.

Stroke survivors tire easily and often have concentration and attention problems soon after a stroke, so at first you may only be able to work on language skills for a few minutes at a time before you need a break. Later on, the length of treatments can increase. Relearning something that usually comes as naturally as speaking can be very frustrating because progress is often slow and hard to measure. Like other aspects of your recovery, improvements in your ability to communicate will come only with time and practice. Some survivors are better able to benefit from speech and language therapy after they have had time to deal with the major life changes caused by the stroke.

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