

The Speech Pathologist's Role with Right Hemisphere Damaged Patients:
A Round Table Discussion

Penelope S. Myers
George Washington University Medical Center
Washington, D.C. 20037

Joyce Fitch West
Veterans Administration Hospital
New York, New York 10010

The round table discussion focused on two central issues: 1) management of right hemisphere damaged patients and 2) the potential role of the right hemisphere in aphasia therapy. The nature of the exchange was often anecdotal, but revealed a number of common concerns and insights which are presented below:

Management of right hemisphere damaged patients:

Those participants who had direct contact with right hemisphere damaged patients agreed that these patients present a variety of communication deficits. The most notable problems cited were: 1) lack of sensitivity; 2) inappropriate behavior; 3) denial of cognitive deficits; 4) lack of motivation; 4) irrelevant conversation; 5) lack of affect; 6) extreme lability (in some cases); 8) visual hallucinations; and 9) a dissociation between what is said and what is experienced.

It was agreed that if the patient's denial could be surmounted, then one might be able to help him cope by training him to verbalize or intellectualize input from his environment. A number of the participants in the discussion had found this to be a helpful strategy. The patient could be encouraged to use his analytical powers to provide him with cues about audience reaction, for example, so that he could modify his inappropriate behavior or even learn to laugh at the punch lines of his own jokes.

Using his analytical powers this way, i.e. by re-verbalizing his environment, does not necessarily help the patient when it comes to the more complex issues of sensitivity and the ability to maintain firm bonds with others. It was agreed that verbalizing input helps on the perceptual and concrete level, but that this strategy has limitations in evoking responsiveness in the patient. It is difficult to motivate right hemisphere patients and to instill in them the sense of life beyond the literal and concrete.

Speculation about the nature of the right hemisphere communication deficits listed above resulted in the consensus that the two sides of the brain process information differently. Most participants agreed that the left is more linear and the right more holistic.

The participants recognized the role of the speech pathologist in treating right brain damaged patients, although it was agreed that more work needed to be done in the area. Several participants from a rehabilitation center noted that right hemisphere patients are routinely referred to them for testing. They, like others, attempt to sort out the nature of the patient's communicative disorders beyond training him to "look to the left" when he reads. It was generally recognized that the speech pathologist's current role is in helping the patient to recognize his cognitive and

affective disorders, and in helping him to intellectualize those deficits that are amenable to such strategies. This is a first, but vital step. The potential role of the right hemisphere in aphasia therapy:

The possibility of using the right hemisphere's capacity for producing images has been investigated in light of its potential activation in aphasia therapy (West, J., 1977). It was noted that the use of broad lexical units such as a verb phrase with very realistic colorful pictures as stimuli might activate the right hemisphere when treating aphasic patients. However, it has been found that line drawings of a more abstract nature are often more successful in aphasia therapy. The reasons for this seeming contradiction were explored. It was suggested that while the right hemisphere is more literal and concrete in linguistic capacity, it is better equipped to process abstract rather than concrete images. This supports the finding that right hemisphere damaged patients were less able than aphasic patients to relate to pictures of metaphoric phrases (Winner and Gardner, 1977).

Various methods of suppressing left hemisphere function and activating right brain function were discussed. Role playing was offered as one method. It was noted by one of the participants that acting out a scene, and letting the aphasic patient describe it, seemed to increase his ability to express himself verbally. The possibility that right hemisphere processing was heightened in such an activity was explored.

Finally, it was agreed that the left hemisphere was difficult to suppress and the right hemisphere difficult to reach. However, the consensus of opinion held that the effort should continue.

Bibliography

- West, J.F. Imaging and aphasia. In R.J. Brookshire (Ed.), Proceedings of the Clinical Aphasiology Conference, May 17-20, 1977. Minneapolis: BRK Publishers, 239-247 (1977).
- Winner, E. and Gardner, H. The comprehension of metaphor in brain-damaged patients. Brain, 100, 719-722 (1977).