

Primary Progressive Aphasia (PPA)

rimary progressive aphasia (PPA) is a gradual decline in the ability to communicate, resulting from degeneration of speech and language networks in the brain. Speech-language pathologists (SLPs) now offer a variety of treatments, with emphasis on rebuilding lost function, supplementing verbal communication with nonverbal modes of expression, and training for communication partners.

Early Stage

 Obtain an evaluation with a speech-language pathologist to evaluate communication abilities thoroughly and establish a baseline for treatment.

- Reduce background noise and distractions to ensure the person with PPA is able to understand the message.
- Face the person, speak slowly and allow time for a response.
- Use compensatory techniques (cueing, clarifying meaning, describing the word) to facilitate successful, rather than perfect communication.
- Include spouse/partner or primary caregiver in speechlanguage therapy session to supplement training at home.
- Practicing and rehearsing personally relevant words or phrases are used to maintain retrieval and pronunciation.

to obtain an evaluation with an SLP to evaluate communication abilities thoroughly and establish a treatment plan.

In the early stage of

PPA, it's important

- Encourage nonverbal communication strategies to supplement when speech is not understood (e.g., "Can you show me?" and offer paper/pencil for concurrent writing/drawing).
- Ask for clarification if a response is incomplete or unclear; do not pretend to understand.
- Suggest that the person carry a card identifying and explaining their diagnosis of primary progressive aphasia.
- Monitor for depression. People with PPA experience frustration and loss over diminishing communication and are at an increased risk of depression.
- Participation in a communication support group can encourage practice and use of language.
- Caregivers may also participate in support groups to learn strategies from other caregivers.
- Evaluate augmentative and alternative communication device or book with SLP, although the individual with PPA may not be interested in these at this stage. (continued)





Primary Progressive Aphasia (PPA) continued

Middle Stage

- Use script training developed in speech-language therapy for topics the person would like to discuss in daily life (e.g., information about their diagnosis, family, favorite activities, etc.).
- Use shorter sentences with a more simple structure for improved comprehension.
- Give one direction or ask one question at a time.
- Use questions that offer a choice, rather than open-ended questions ("Do you want coffee or juice?" rather than "What do you want to drink?").
- Develop a personalized communication notebook or communication wallet (pocket sized cards on keyring). These offer a visual lexicon with pictures of key words, people and activities for access by the person with PPA and communication partners.
- Use all modalities to support communication (gestures, pictures, props, visuals).
- Use affirming statements (e.g., "Take your time, I'll wait.")
- With an SLP, evaluate an augmentative and alternative communication device or book.

Late Stage

- Use multiple modalities (gestures, writing single words, drawing) as verbal communication becomes increasingly challenging.
- Check for comprehension often.
- Encourage regular use of a communication book, wallet and/or other augmentative and alternative communication device.
- Train home health, adult day and residential care staff to use identified communication strategies and tools.
- Adapt key words, personally meaningful phrases and scripts for changes in setting as an adult day program or residential care is introduced.
- Engage speech-language pathologist for evaluation of swallowing and dysphagia as needed.
- Observe triggers for behavior changes and a generalized increase in symptoms; frustration over an inability to communicate wants or needs is often expressed in challenging behaviors.

