

# **Improving outcomes from aphasia rehabilitation: Moving towards evidence-based, person-centred, technology-supported, wholistic aphasia care**

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## **ABSTRACT**

Globally, aphasia remains a high prevalence, high burden disability for brain injury survivors, their families, friends, and societies. Systematic reviews of speech and language therapy for aphasia after stroke confirm therapy is effective with meaningful recovery extending for many years post-injury. However, aphasia is a highly heterogeneous condition and intervention trials have demonstrated large individual variability in treatment responsiveness. Aphasia severity, patho-linguistic/cognitive profiles, age, sex, and time post-onset are possible building blocks of a future complex algorithm that will, once developed, enable enhanced individually tailored evidence-based therapy. Although the overall dose and treatment intensity schedule is critical in determining outcomes, we face a significant challenge in most countries where the current available doses fall well short of evidence-based thresholds. Maintenance of treatment effects also requires attention with current research examining the need for tailored maintenance doses.

Aphasia has negative impacts beyond language impairment and communication disability, including higher adverse events in hospital, lower rates of return to work, high rates of psychological distress, depression and anxiety, greater loss of friendships, greater carer burden, and poorer quality of life compared to brain injury survivors without aphasia. Therefore, effective aphasia rehabilitation must also span psychological, social, and communicative environment domains, necessitating multi- and inter-disciplinary research and clinical practice. Research is underway that will provide high level evidence for the effectiveness of a range of psychosocial interventions that will challenge current models of care. Preparing clinicians for these extended practice roles is a high priority with evidence emerging for efficacious education modules.

Technology, once harnessed and adapted for communicatively accessible inclusion, offers incredible opportunity to address many service-level challenges, support person-centred tailoring of aphasia interventions, and longer-term self-management. The future of aphasia rehabilitation is bright, and speech language pathologists have a pivotal role in ensuring that future.