



# CALL FOR ABSTRACTS

Abstract submission system will be open from 1st December 2018 to 15th January 2019, 11.59 pm (Central European Time)

We welcome abstracts on all aspects of aphasia (400–600 words excluding the titles and references)

## INSTRUCTIONS FOR ABSTRACT SUBMISSION

The Nordic Aphasia Conference 2019 organisation committee strongly encourages scientists and clinicians to submit abstracts on aphasia and related acquired neurogenic communication disorders (e.g., progressive aphasia, apraxia of speech, cognitive-communicative disorders) to be presented either as oral or poster presentations in the conference. We would like to emphasise that studies with healthy individuals as well as clinical pilot studies and clinical experiments which might not meet all scientific standards but bear potential to inform future studies and clinical practice are warmly welcomed.

Notification of abstract acceptance and its category (oral or poster) will be posted by the end of February, 2019. Please also note that the priority of oral presentations is given to scientific studies on the theme of the conference (i.e., multilingualism or technology-mediated aphasia therapy) and which have clear clinical implications. Accepted abstracts will be published in the conference proceedings booklet that will be available at the conference for all registered attendees. Please note that the presenter of the abstract must register for the conference.

The abstracts are sent via abstract submission system (<https://konsta.utu.fi/Default.aspx?tabid=88&tap=5029>). In the abstract submission system, you are first asked to fill in contact details of the corresponding author. On the second page, you are asked to express if you prefer an oral or a poster presentation and to upload your text in a single file. Please make sure to press “Attach file” in order to upload the text. In the final stage, you are asked to confirm your submission. After you have completed the submission, you will receive an automatic email confirmation with a code that you can use in order to modify the information you have given until 15<sup>th</sup> January, 2019.

Write your abstract in English using Times New Roman, font size 12 throughout the text, using maximum of 600 words. Please note that tables and figures are not allowed. Save your abstract using one of the following formats; .doc, docx or rtf.

**If you have any questions regarding the abstract submission, please contact us via email: [nac2019@utu.fi](mailto:nac2019@utu.fi)**



# CALL FOR ABSTRACTS

We kindly ask you to provide all of the following headings with relevant information:

**Title:**

**Authors:** (underlying the person who is going to present the study in the conference)

**Affiliations:**

**Correspondence information:** email address here

## ABSTRACT

**Background and aims:** Describe the background or motivation of the study or clinical experiment and state the aims and objectives of the study including the possible research questions and hypotheses.

**Methods:** Describe the data (e.g., number of participants [if relevant] and relevant participant details such as age and severity of aphasia), data collection, materials employed, and describe how you have analysed or explored the data.

**Results and main contribution:** Outline the results and outcomes.

**Conclusions:** State the basic conclusions of the study.

**Implications:** Discuss implications for future research, for management, treatment or service delivery.

**References:** Please provide the key references here (max. 5)

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## SAMPLE ABSTRACT

**Title:** Identifying functionally relevant vocabulary for aphasia treatment: Experience from a selection process

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## ABSTRACT

**Background and aims:** Word-finding treatments for aphasia have shown positive item-specific effects but generalization to untreated items is scarce (reviewed in Wisenburn & Mahoney, 2009). Hence, it is necessary to identify and target treatment to functionally relevant items. However, the literature lacks evidence of how to best identify functional items for therapy (reviewed in Renvall, Nickels & Davidson, 2013a, b). Our aim was to investigate different word-selection methods and to provide evidence of the strengths and weaknesses of the methods.

**Methods:** We conducted an exploratory study with three people with aphasia (PWA) and their significant others (SO). Two PWA were elderly males (60 and 70 years old) living with their partners

and one was a 39-year-old male, living alone and participating with his mother. Four different methods were trialled: 1) Production of words on a blank page; 2) Keeping a communication (disruption) diary; 3) Interview based on the Functional Communication Therapy Planner (Worrall, 1999); 4) Rating usefulness of 400 words representing the most common Finnish words. Here, we present quantitative data (e.g., number of words, proportion of word-classes, and time spent on methods) and provide descriptive data on participants' and investigator's experiences.

**Results and main contribution:** For two PWA, the strategy of a blank page elicited 22 and 25 words and the communication diary 8 and 98 words, both including mainly common nouns. Both methods were quick to administer and instruct in face-to-face sessions and the elicited words were readily available for therapy. One PWA could not produce any single word on a blank page even with assistance and the communication diary resulted only in 7 words. Through the interviews (lasting 54-82 minutes), 8-55 words were identified. Based on a frequency-based word list, 124-263 words were scored highest (4-5) and thus identified as meaningful. The words represented a broad spectrum of word-classes including also words not identified through other methods (e.g., adjectives and pronouns). Time was needed for face-to-face session (up to 120 min) and work at home. In addition, the investigator needed time to pull out the words with the highest scores. The study revealed different strengths and weaknesses of the methods and variation between the participants. The quickest methods for the investigator (blank page and communication diary) elicited concrete words which were highly individual. However, strong assistance and interpretation was needed, and for one PWA, blank page was impossible. Interviews were long and successful only in one case. Rating words was successful in eliciting a wide variety of words for all participants but took time and effort.

**Conclusions:** The methods that are quick for a clinician (e.g., blank page and communication diary) may elicit individually meaningful items if there is support available. A frequency-based word-list elicits different word-classes and may be used even when production of words is difficult.

**Implications:** The choice of selection methods depends partly on the resources (e.g. time) and whether an SO is available for the process. When an SO is not available, the strategy of a blank page and frequency-based lists (of different sizes) may complement each other.

### References

- Renvall, K., Nickels, L., & Davidson, B. (2013a). Functionally relevant items in the treatment of aphasia (part I): Challenges for current practice. *Aphasiology*, 27, 636–650. doi: 10.1080/02687038.2013.786804
- Renvall, K., Nickels, L., & Davidson, B. (2013b). Functionally relevant items in the treatment of aphasia (part II): Further perspectives and specific tools. *Aphasiology*, 27, 651–677. doi: 10.1080/02687038.2013.796507
- Wisenburn, B. & Mahoney, K. (2009). A meta-analysis of word-finding treatments for aphasia. *Aphasiology*, 23, 1338–1352. doi: 10.1080/02687030902732745
- Worrall, L. (1999). *FCTP: Functional Communication Therapy Planner*. Milton Keynes, UK: Speechmark Publishing (first published 1999, reprinted 2000, 2008, 2010).