

Descriptive Information, see Table 1).

Cohesive Devices Analysis of Discourse Production between Individuals with Left Hemisphere Damage with Wernicke's Aphasia (IWA) and those with Right Hemisphere Damage (RHD)

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M=54.84 (SD=13.5)



Conjuct is n

25. 5

20.00

Results

2.75

6.48

References

43.6

31.09

0.61

Introduction Method Figure 1. Cohesive Devices Between RHD and Wernicke's Aphasia Groups ☐ Cohesion Data Coding and Statistical Data Analyses: In ☐ The discourse production of individuals with Rightthis study, the analysis of the discourse data was based Hemisphere Damage (RHD) has been relatively understudied Cohesive Devices between RHD and IWA groups on general rules and coding structures from previous compared to individuals with aphasia with Left-Hemisphere studies [2,7]. Following six types of cohesive devices were Damage (LHD) [1]. manually coded and analyzed: Devices ☐ However, it is crucial to consider the significant heterogeneity 60 Grammatical devices: 50 within aphasia population, where different types of aphasia reference, substitution, and ellipsis 40 display distinct patterns of discourse production patterns [2]. Lexical devices: reiteration and collocation Cohesive 20 10 0 Therefore, comparisons between these two hemispheric Conjunction damage groups require caution. The number of cohesive markers for each type of device Research on the discourse production of individuals with was computed and compared between the RHD and IWA Wernicke's aphasia (IWA) has predominantly focused within groups. the broader "aphasia" category, and the unique characteristics > Twenty percent of the coding was tested for a good ■IWA of discourse production specific to this type have not been reliability using the inter-rater correlation coefficient thoroughly studied or compared to the RHD group. **Discussion and Conclusion** Previous studies have revealed that the RHD group often > The number of cohesive markers were compared exhibit off-topic conversation, as well as irrelevant and between the RHD and IWA groups using the Multivariate ☐ The IWA group used more substitution markers and redundant speech [3]. They also experience difficulties in Analysis of Variance (MANOVA). fewer collocation markers compared to the RHD group. integrating content and understanding the main points of ☐ These two aspects may indicate the distinctive features stories [4]. Results of aphasia in comparison to RHD. Interestingly, the IWA group also show off-topic and excessive ☐ There were statistically significant differences in the use ❖ IWA group: less collocation → weak association of irrelevant utterances in conversation [5], indicating sharing lexical items of the cohesive markers in two groups, F(6,36)=8.173, similar patterns in discourse production. However, there is a p < 0.001. Wilk's A = .423. ❖ IWA group: more substitution → presence of aphasia lack of literature comparing discourse production, specifically The Bonferroni Post hoc test revealed that the A high frequency of substitutions may for cohesive devices, between the RHD and IWA groups. signify improved efficiency and cohesion in IWA group (M=10.7) was significantly higher ☐ Thus, the current study aims to address the gap by examining spoken discourse among individuals without than the RHD group (M=5.65, SE=2.23) in the the cohesive devices in these two groups: Right Hemisphere aphasia (controls). mean substitution scores. Damage and Wernicke's Aphasia Groups However, in IWA, this could indicate The IWA group (M=.61) was significantly lower reduced efficiency and a lack of cohesion. in the mean scores for collocation than the Method RHD group (M=2.6, SE=.55). Discourse Data Collection: The discourse data No significant differences were found in other in this study were obtained from cohesive devices between the two groups (see [1] Minga, J., Johnson, M., Blake, M. L., Fromm, D., & MacWhinney, B. (2021). Making Sense of Right Hemisphere Discourse Using RHDBank. Topics in language disorders, 41(1), 99-122. the AphasiaBank database on the TalkBank System [6]. Figure 1). [2] Zhang, M., Geng, L., Yang, Y., & Ding, H., (2021) Cohesion in the discourse of people with post-stroke The Cinderella discourse task was administered to each aphasia, Clinical Linguistics & Phonetics, 35:1, 2-18. DOI:10.1080/0269 Table 1. Participants' Descriptive Information [3] Cherney, L., and Canter, G. (1993). Information content in the discourse of patients with probab participant. Alzheimer's Disease and patients with right brain damage. Aphasiology 21, 123-234. Participants: The current study analyzed the [4] Moya, K. L., Benowitz, L. I., Levine, D. N., & Finklestein, S. (1986). Covariant defects in visuospatial Group RHD IWA abilities and recall of verbal narrative after right hemisphere stroke. Cortex; a journal devoted to data obtained from two groups of participants: 1) the study of the nervous system and behavior, 22(3), 381-397. https://doi M=57.98 (SD=14.11) M=66.23 (SD=10.42) Twenty-three individuals with Right-Hemisphere [5] Pallickal, M. & Hema, N., (2020) Discourse in Wernicke's aphasia, Aphasiology, 34:9, 1138-1163, DOI: 10.1080/02687038.2020.1739616 Damage (RHD), and 2) 23 individuals with Education M=18.45 (SD=4.31) M=15.62 (SD=2.48) [6] MacWhinney, B., Fromm, D., Forbes, M., & Holland, A. (2011). AphasiaBank: Methods for studyin discourse. Aphasiology, 25, 1286-1307. Wernicke's aphasia (IWA) (For the [7] Halliday, M. A. K., & Hasan, R. (1976). Cohesion in English. London, UK: Longman

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