## COMPARISON OF QUALITY OF COMMUNICATION LIFE IN PATIENTS WITH FLUENT AND NONFLUENT APHASIA

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**Background and aim:** There are a few studies concerning communication as a factor of life satisfaction and the impact of communication disorders on quality of person's life. The aim of this study was to examine the quality of communication life in patients with fluent aphasia.

**Method:** A total of 40 patients (20with fluent and 20 with nonfluent apahsia), aged 53-75 participated in this study. All patients were right-handed, with a single left hemisphere CVA; they were at least six months post-onset without visual deficits and/or dementia. The diagnsois and type of aphasia was done by Boston Diagnostic Aphasia Examination (Goodglas and Kaplan, 1983). According to the aphasia severity rating scale, all patients were devided in three gropups: 1. severe aphasia, 2. moderate aphasia and 3. mild aphasia. The Quality of Communication Life Scale (QCL) was applied to determine the impact of a aphasic disorders on an adult's relationships and interactions with communication partners and on participation in daily life activities.

**Results:** The results have shown that type of aphasia has a significant impact on the quality of communication life in the aphasics; patients with nonfluent aphasia achieved the lowest score on the QCL, while patients with fluent aphasia have achieved the highest. At the same time, a significant correlation between the severity of aphasia and quality of life has been shown; patients with severe forms of aphasia have a lower score on the QCL compared to the patients with moderate and mild aphasia.

**Discussion:** The analysis of obtained results point out differences in performance on the QCL scale between tested groups: patients with nonfluent aphasia had problems in all examined domains of life and communication (Socialization/Activities, Considered/Self-Concept, Roles and Repsonsibilities, General Well-Being), while patients with fluent aphasia mostly have no problems in the field of Roles and Repsonsibilities. The quality of communication life analysis in aphasic patients can assist in choosing aphasia treatment method.

**Key words**: fluent aphasia, nonfluent aphasia, severity of aphasia, the quality of communication life

## References

Goodglass, H., Kaplan E. & Barresi, B (2001). *Boston Diagnostic Aphasia Examination,* 3<sup>rd</sup> edition. Baltimore, Maryland.

Paul, D., Frattali, C., Holland, A., Thompson, C., Caperton, C., & Slater, S. (2004). Quality of Communication Life Scale. American Speech - Language Hearing Association, Rockville, MD. Vuković, M., Jovanović, N., Petrović-Lazić, M., Vuković, I. & Terzić, I. (2013). Quality of communication life in individuals with vascular aphasia – Preliminary research. *The 7<sup>th</sup> Intrenational Scientific Conference "Special education and rehabilitation today"*. Belgrade. University of Belgrade – Faculty of Special Education and Rehabilitation, p. 126.

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