Let’s call it “aphasia”: Rationales for eliminating the term “dysphasia”

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Abstract

Health professionals, researchers, and policy makers often consider the two terms aphasia and dysphasia to be synonymous. The aim of this paper is to argue the merits of the exclusive use of the term aphasia and present a strategy for creating change through institutions such as the WHO-ICD. Our contention is the one term avoids confusion, speech-language pathologists prefer aphasia, scholarly publications indicate a preference for the term aphasia, stroke clinical guidelines indicate a preference for the term aphasia, consumer organizations use the title aphasia in their name and on their websites, and languages other than English use a term similar to aphasia. The use of the term dysphasia in the broader medical community may stem from the two terms being used interchangeably in the ICD10. Aphasia United http://www.shrs.uq.edu.au/aphasiaunited, an international movement for uniting the voice of all stakeholders in aphasia within an international context, will seek to eliminate the use of the term dysphasia.

Keywords

Terminology, stroke, aphasia, dysphasia

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The term aphasia comes from the Greek “a” (without) “phásis” (speech) or, interpreted more loosely, “speechless”. In terms of its derivation, aphasia may be interpreted literally as a total loss of language, while dysphasia denotes a partial impairment of language impacting the ability to communicate. Nevertheless, terminology continues to evolve. Even early pioneers of aphasia research, such as Trousseau, Wernicke, Jackson, and Luria, all used the term aphasia to describe the symptomology of aphasia at varied levels of severity. While the labelling distinction between the prefixes –a and -dys is etymologically correct, the current preference across academics, researchers, clinical practitioners, and consumers worldwide is to use one label, aphasia, to refer to complete and/or partial loss of language, in which language is defined as how meanings are conveyed symbolically, such as through speech, writing, or sign. Therefore, aphasia is described as impairments of comprehension and expression in the verbal, written and signed modalities.

**One term avoids confusion**: The use of one term to refer to aphasia avoids confusion regarding diagnosis. Furthermore, use of a single term across all researchers, care providers, policy makers, and consumers allows consistent access to empirical and clinical information and promotes clearer and more efficient advocacy efforts. Since it is extremely rare to find anyone with a total loss of language affecting all modalities, particularly in the chronic phases of recovery, the choice of one term might lean towards dysphasia. However, selecting the term aphasia avoids the frequent and unfortunate confusion with the widely used term dysphagia (a disorder of swallowing), which is pronounced and spelt similarly. Since both dysphasia and dysphagia are frequent complications of acquired brain injury, confusion of the words is a potential problem for health care providers as well as consumers. For example, speech-language pathologists frequently report erroneous referrals for “expressive dysphagia” in clinical practice.

**Speech-language pathologists prefer aphasia**: In a recent survey of Australian speech-language pathologists, the vast majority of respondents (83%, n=120) demonstrated a preference for the term aphasia. Most international speech-language pathology professional organizations and relevant national organizations also exclusively use the term aphasia on their websites.

**Scholarly publications prefer the term aphasia**: Unfiltered English language searches with the academic search engine EBSCO for the past 20 years from 1995 to 2015 revealed 20,271 hits for aphasia versus only 4,650 hits (19%) for dysphasia. Many of the articles using the
term dysphasia were in journals that were not easily accessed or well cited, with low impact ratings. A search in the topic-specific, international scholarly journal Aphasiology resulted in 11,101 hits for aphasia and only 108 hits (1%) for dysphasia. Figure 1 shows the Google Ngram View of aphasia and dysphasia. The Google Ngram Viewer charts frequencies of these words in a range of languages across Google. This figure shows the dominant use of the term aphasia on the internet. In striking contrast to this ascendant academic preference for using the term aphasia, ICD10 and ICD9 use both aphasia and dysphasia interchangeably: The code R47.0 is headed as both dysphasia and aphasia.

Figure 1. Google nGram of the terms aphasia and dysphasia

Stroke clinical guidelines indicate a preference for the term aphasia: Clinical Practice Guidelines are developed and published by stroke organizations to inform health professionals and consumers about best practices for the management of stroke. A search of clinical guidelines for stroke across the world found that aphasia was the term adopted in all guidelines. The Australian, New Zealand, and Scottish guidelines acknowledged that both terms exist but used the preferred term aphasia. There was no mention of dysphasia in the
American guidelines and the term dysphasia only appeared in other guidelines (e.g., Canadian, Malaysian, Catalan) to refer to older assessments or studies from the UK. The UK NICE Full Clinical Guideline 16212 contained both terms with 7 instances of dysphasia and 168 instances of the term aphasia, often reflecting the use of the former term in publications cited, and additionally suggesting this term is still used by a minority in the UK. The World Stroke Organization guidelines and action plan, used solely the term aphasia. In summary, our search through current guideline documents indicates that the world’s stroke organizations promote the term aphasia as best practice.

**Consumer organizations use the title aphasia in their name and on their websites:** The term aphasia is the chosen label featured in written resources and websites of aphasia consumer organizations worldwide (see table 1). A search of the 18 consumer websites resulted in only 2 hits for the term “dysphasia” (as in “[aphasia] sometimes known as dysphasia”). In countries in the Eastern world, where public awareness of aphasia tends to be poorer than in the West the term aphasia appears in almost all English-language versions of educational materials regarding this disorder.

*Table 1. Organizations using the term Aphasia.*

- Academy of Aphasia, [http://www2.academyofaphasia.org](http://www2.academyofaphasia.org)
- Afasie Vereniging Nederland, [http://www.afasie.nl](http://www.afasie.nl)
- Aphasia Alliance, [http://www.aphasiaalliance.org](http://www.aphasiaalliance.org)
- Aphasia Hope Foundation, [http://www.aphasiahope.org](http://www.aphasiahope.org)
- Aphasia and Stroke Association of India, [http://aphasiastrokeindia.com](http://aphasiastrokeindia.com)
- Association Quebecoise des Personnes Aphasiques, [http://www.aphasie.ca](http://www.aphasie.ca)
- Audiologopaedisk Forening, [http://www.alf.dk](http://www.alf.dk)
- British Aphasiology Society, [http://bas.org.uk](http://bas.org.uk)
Fundafasia, http://www.fundafasia.org
German Federal Association for Logopedics, http://dbl-ev.de
Indian Speech and Hearing Association, http://ishaindia.org.in
International Association of Logaoedics and Phoniatrics, http://ialpasoc.info
Regroupement des associations de personnes aphasiques du Québec, http://aphasiequebec.org
South African Aphasia Group, http://www.mystroke.co.za
Speakability (strategically modified from the previous “Action for Dysphasic Adults,” UK), http://www.speakability.org.uk
Speakeasy (UK), http://www.buryspeakeasy.org.uk
Sociedade Brasileira de Fonoaudiologia, http://sbfa.org.br
Tavistock Trust for Aphasia (UK), http://aphasiatavistocktrust.org
Union of European Phoniatricians, http://www.phoniatries-uep.org

Many more support organizations and educational resources are found for the search term aphasia. For example, if consumers in Australia carry out an online search using the term dysphasia, they are directed to a UK or USA based organization. If they search using the term aphasia, then the most relevant local Australian Aphasia Association appears on the first page.

Languages other than English use a term similar to aphasia. Table 2 shows that among the 26 languages that use the Latin alphabet, all but one use a term similar to aphasia (from http://aphasia-international.com/languages). Many of these languages do not include a term that corresponds to dysphasia in English.
Table 2. Terms for aphasia in languages other than English that use the Latin alphabet.

<table>
<thead>
<tr>
<th>Terms for aphasia</th>
<th>Languages other than English using the Latin alphabet</th>
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<tbody>
<tr>
<td>afazia</td>
<td>Albanian, Romanian</td>
</tr>
<tr>
<td>afasi</td>
<td>Danish, Norwegian, Swedish</td>
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<tr>
<td>afasia</td>
<td>Basque, Brazilian, Finnish, Indonesian, Papiamentu, Portuguese,</td>
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<tr>
<td>afasie</td>
<td>Italian, Spanish, Swahili</td>
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<tr>
<td>afaasia</td>
<td>Afrikaans, Czech, Dutch</td>
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<tr>
<td>aphasia</td>
<td>Estonian</td>
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<tr>
<td>afàzia</td>
<td>French, German, Austrian</td>
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<tr>
<td>afazja</td>
<td>Hungarian</td>
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<tr>
<td>afazija</td>
<td>Polish</td>
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<td>afazi</td>
<td>Turkish</td>
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<tr>
<td>màlstol</td>
<td>Icelandic</td>
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</table>

Conclusion and Recommendations

Aphasia is the more frequently used term in specialised aphasia research and practice internationally. Current scholarly publications, as well as consumer materials, reflect the preference for the term aphasia. There is a need to reflect the current preference for the term aphasia in the ICD10 and anywhere else the term still might be used interchangeably with dysphasia. Using both terms is a source of confusion, especially for consumers and for health professionals outside the specialist field.

The term dysphasia should be eliminated from the vocabulary of health professionals, researchers, and consumer organizations. Aphasia United will promote the consistent and worldwide use of the term aphasia. The educational programs of disciplines involved with the care of people with aphasia (e.g., medicine, nursing) will be particularly targeted. Through its networks, Aphasia United will challenge the use of the term dysphasia. Aphasia United will approach the World Health Organization ICD Committee to advocate for the use of one term only. Stroke clinical guidelines will continue to be monitored for consistent use of the terms. Ongoing internet searches will also determine whether there is confusion over the terms for people wishing to gain access to information and support. This is the first step in achieving an internationally united voice for people with aphasia and those who support them.
References


