

# RESEARCH INFORMATION for PEOPLE WITH APHASIA

**Constraint Induced or Multi-Modal aphasia  
rehabilitation: A Randomised Controlled Trial  
(RCT) for stroke related chronic aphasia**



## WHO IS DOING THE RESEARCH?

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**Miranda** Rose

Associate Professor



Miranda is a **speech pathologist** working in **research** at La Trobe University.

The study has been granted **permission** by the **La Trobe University Ethics Committee** (Application No. 15-043)



## ABOUT?

We know that **living with aphasia is difficult.**



**Speech pathology** can help. There are **lots** of types of **treatments.**



We don't know **which treatment** is the **best** for each person.



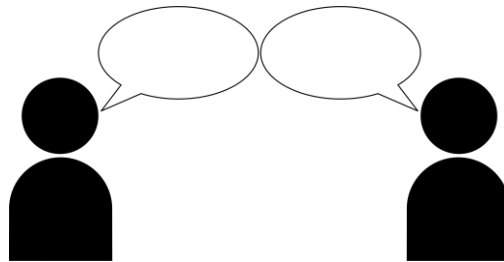
## THIS STUDY

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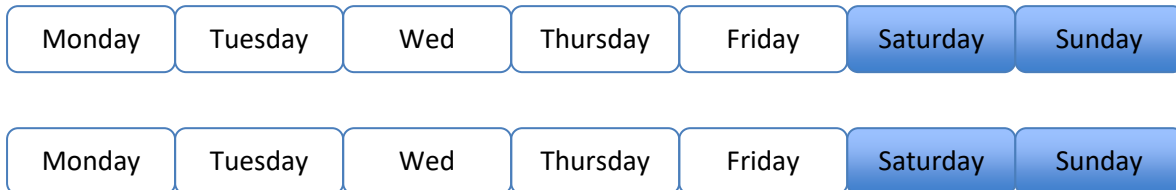
We will **compare** different treatments for people with aphasia.

### 1. Group A - Constraint-Induced Aphasia Therapy (CIAT)

**CIAT** therapy focuses on **talking**.



Therapy lasts for **30 hours** over **2 weeks**.



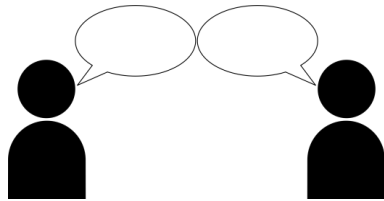
Therapy is delivered in a **group of three people** with aphasia and it is in addition to your usual aphasia therapy.



You **CAN** continue your usual aphasia therapy during this time.

## 2. Group B - Multi-Modality Aphasia Treatment (M-MAT)

M-MAT focuses on **talking**, **drawing**, **writing** and **gestures**.



talking



writing



drawing



gesture

Therapy lasts for **30 hours** over **2 weeks**.

Monday

Tuesday

Wed

Thursday

Friday

Saturday

Sunday

Monday

Tuesday

Wed

Thursday

Friday

Saturday

Sunday

Therapy is delivered in a **group of three people** with aphasia and it is in addition to your usual aphasia therapy.



You **CAN** continue your usual aphasia therapy during this time.

### 3. Group C - Usual Care

**No extra treatment** is given. You continue with your **normal appointments or therapy** for two weeks.

Monday	Tuesday	Wed	Thursday	Friday	Saturday	Sunday
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Monday	Tuesday	Wed	Thursday	Friday	Saturday	Sunday
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**4. Extra therapy for Group C**

**Later** in the study, we will **check** that you are **still able to participate** in therapy. If **yes**, you may receive **CIAT** or **M-MAT**.

**CIAT**                      or                      **M-MAT**

Therapy lasts for **30 hours** over **5 weeks**.

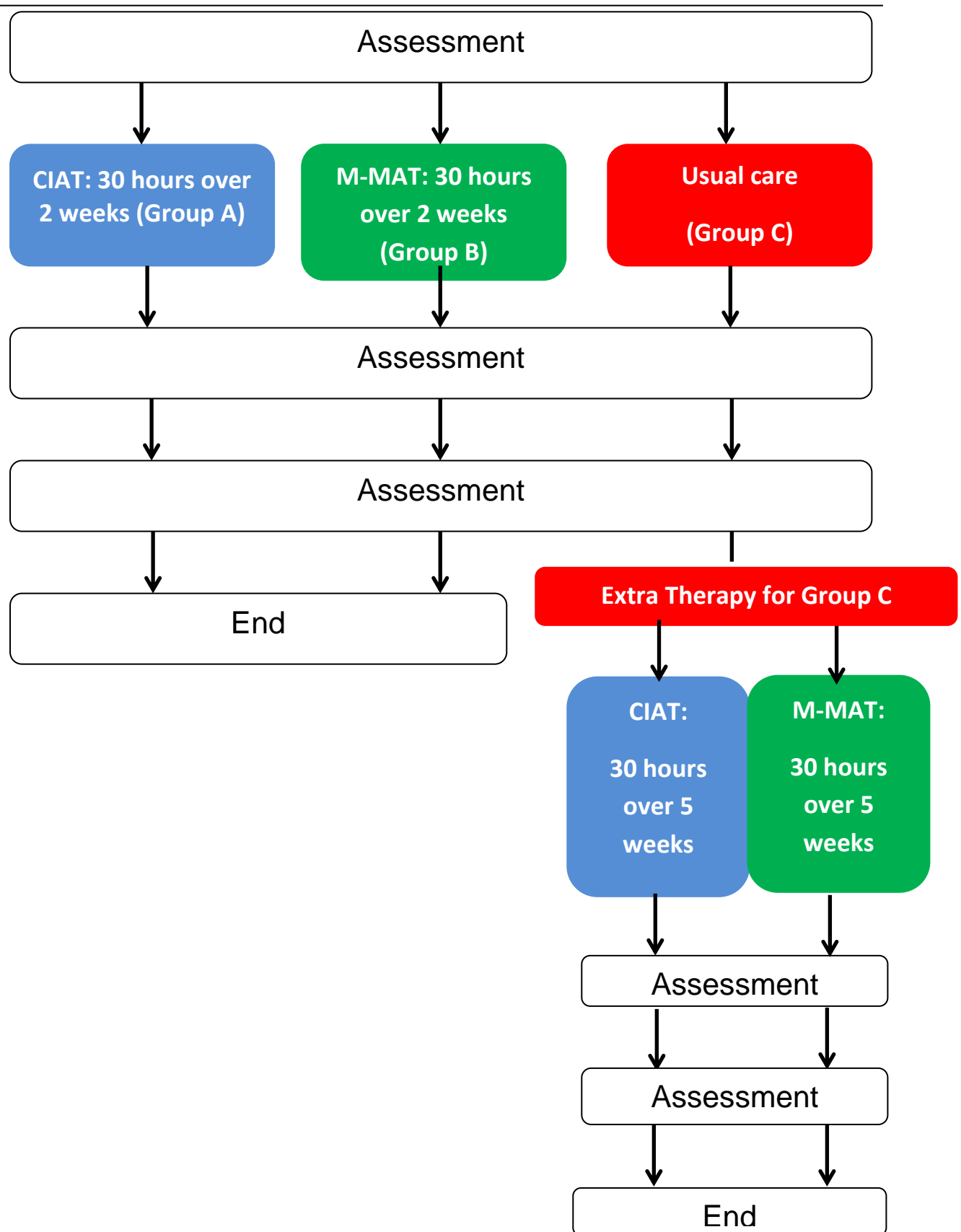
Monday	Tuesday	Wed	Thursday	Friday	Saturday	Sunday
Monday	Tuesday	Wed	Thursday	Friday	Saturday	Sunday
Monday	Tuesday	Wed	Thursday	Friday	Saturday	Sunday
Monday	Tuesday	Wed	Thursday	Friday	Saturday	Sunday
Monday	Tuesday	Wed	Thursday	Friday	Saturday	Sunday

Therapy is delivered in a **group of three people** with aphasia.



You **CAN** continue your usual aphasia therapy during this time.

## TIME LINE





## SEVEN PARTS IN THE STUDY

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### 1. Assessment



You will complete **tests** of **language, communication, memory,** and **thinking**.

This will happen at a **clinic** or at your **home**.

You will be **asked to provide** copies of your **brain scans** from **after your stroke** if possible or **allow** one of the **researchers** to follow up a **copy** of these **scans for you**.

There will be **2 -3** assessment sessions, with each lasting for **1 – 2½** **hours**.

## 2. Treatment

A **computer** will decide which **treatment** you will **receive**. This is done **randomly** and the research team have **no control over** which treatment you might receive.



You may receive:

**CIAT** to work on your **talking**

or

**M-MAT** to work on **talking, writing, drawing** and **gestures**

or

**Usual Care** – your **normal** activities.

### 3. Assessment



You will complete **tests after the treatment period.**

This will happen at a **clinic** or at your **home.**

There will be **2 - 3** assessment sessions, lasting for **1 – 2½ hours.**

Between this assessment and the last assessment (12 weeks), you will fill in a **diary.** We will **text or call you regularly to remind you.**

## 4. Follow-up assessment



You will complete **tests twelve weeks** after treatment.

This will happen at a **clinic** or at your **home**.

There will be **2 - 3** assessment sessions, lasting for **1 – 2½ hours**.

## 5. Extra Therapy for Group C

After the follow up assessment if you are in **Group C** we will **check** that you are **still able to participate** in therapy. If **yes**, you may receive **CIAT** or **M-MAT**.



You will receive:

**CIAT** to work on your **talking**

or

**M-MAT** to work on **talking, writing, drawing** and **gestures**.

## 6. Extra Therapy Assessment



You will complete **tests after the treatment period.**

This will happen at a **clinic** or at your **home.**

There will be **2 - 3** assessment sessions, lasting for **1 – 2½ hours.**

Between this assessment and the last assessment (12 weeks), you will fill in a **diary.** We will **text or call you regularly to remind you.**

## 7. Extra Therapy Follow-up assessment



You will complete **tests twelve weeks** after treatment.

This will happen at a **clinic** or at your **home**.

There will be **2 - 3** assessment sessions, lasting for **1 – 2½ hours**.

## VIDEO RECORDING

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During assessment and treatment, we will use a **voice recorder** and **camcorder** to record what is happening.



Why?

- to **collect information** about the **treatments**
- make sure the **treatment** is being given **correctly**.



## AM I THE RIGHT PERSON FOR THE RESEARCH?

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You have to:

- be **over 18 (eighteen) years** of age ✓
- have had your **stroke/brain injury** more than **6 months** s  
**ago** ✓
- have **Aphasia** ✓
- have used **English well before** your stroke/brain injury ✓
- **attend all study visits** ✓
- be able **to manage going to the toilet** ✓
- have **a carer/close other** who can **attend assessment** ✓  
**visits**



## AM I THE RIGHT PERSON FOR THE RESEARCH?

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You **cannot** participate if you :

- have a **diagnosed cognitive deficit** (problem with **thinking** or **memory**) 

- have severe **apraxia** of speech 

- **Cannot attend** all study visits 

If you have other **problems** such as:

- **current depression, anxiety,** or other **mental illness**
- **taking illegal drugs**
- **vision** or **hearing** problems

they need to be **managed** for you to **participate**.

**For example:** by wearing **glasses** or taking **medication**.



## WHO WILL BE IN THE TREATMENT GROUPS?

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There will be **2-3 (two-three)**

**people with aphasia** in each group.



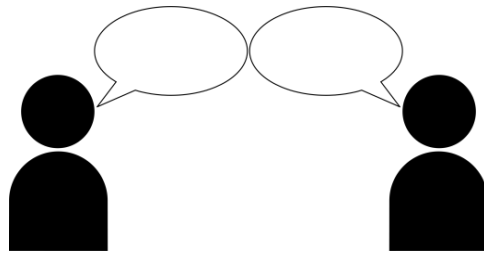
There will also be a **speech pathologist** and a **member of the research team** may also **be present**.



## ACTIVITIES BE?

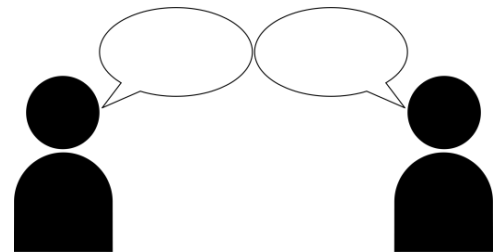
### Constraint-Induced Aphasia Therapy (CIAT)

- Practising **words** and **sentences**



### 2. Multi-Modality Aphasia Treatment (M-MAT)

- Practising **words** and **sentences**
- Practising **drawing**
- Practising **writing**
- Practising using **gestures**



## WHERE WILL THE GROUP HAPPEN?

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Room: \_\_\_\_\_

Building: \_\_\_\_\_

Address: \_\_\_\_\_

**Family** members are **not** included in the group.

## INFORMATION ABOUT YOU

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We will **collect** the following **types of information**:

- **your answers** to **questions** and **tests**
- **video recordings** of **you** having a **conversation** with your **carer or close other**
- **interviews** with **you**

This information will be **used** and **stored**:

- on **paper** and
- on the **computer**

The information will be **kept** for at least **15 years**.

## INFORMATION ABOUT YOU

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All **information** about you will be:

- **labelled** with a **code (no names) of numbers and letters.**

***M.A. 123***

***M.R. 456***

***L.L. 059***

The information will be **stored safely** in:

- a **locked filing cabinet** at **La Trobe University**



- a **computer** with a **password**



## INFORMATION ABOUT YOU

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Information about you will be seen by

- the **research team**
- and **staff** working on the **project**

After **15 years**, the information may be **destroyed**.





## INFORMATION ABOUT YOU

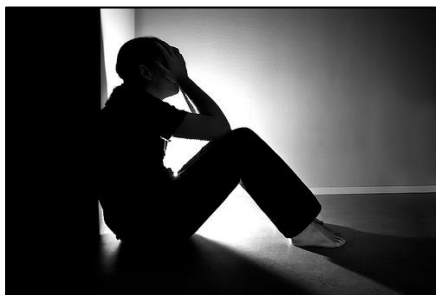
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We will only **share** your information **if**:

- we are **asked under law**



- **you** or **someone else** is at **risk of harm**



## WHAT WILL HAPPEN TO THE RESULTS OF THE STUDY?

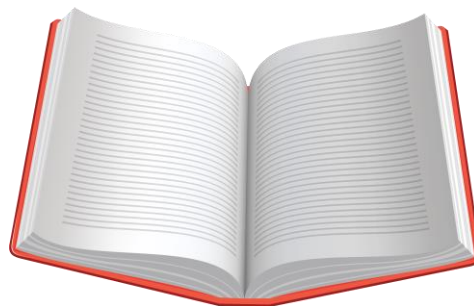
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The **results** of this study will be:

- presented at **conferences**



- published in **journals**



Your **identity** will stay **private**.



## HOW MIGHT THE RESEARCH BENEFIT ME?

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You **might benefit** from:

- Meeting **new people** and **having conversations**
- Practising your **communication skills**
- Trying **new things**
- Building **confidence** in yourself
- **Taking part** in something that will **help other people with aphasia**



We **cannot guarantee** that you will benefit.

## WHAT ARE THE COSTS OF TAKING PART?

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You will need to **travel** to the treatment sessions. This will take time.



We will pay your **travel expenses**.



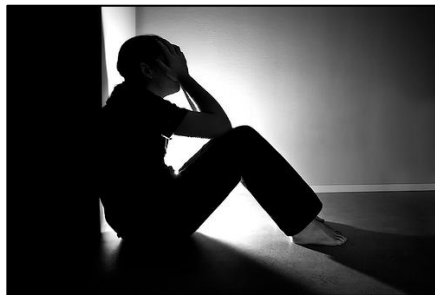
## WHAT ARE THE RISKS OF TAKING PART?

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You may feel **tired** after the assessment and treatment sessions.



You may feel **sad** or **depressed** after the assessment and treatment sessions.



## WILL MY DECISION HAVE ANY CONSEQUENCES?

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Your decision to:

- **participate,**
- **not participate** or
- **stop participating**



will **not affect** your **relationship** with:

- **La Trobe University,**
- your **relationship** with any of the **researchers,** or
- your **opportunity** to **receive** other **services** from them.

## WHAT HAPPENS IF I AGREE TO PARTICIPATE?

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We will ask you to **sign** a **consent form**



This means you:

- **understand** what we have **explained** to you,
- have had the chance to **ask** us **questions** and
- **agree** to **all of this information**



## WHAT IF I WANT TO CHANGE MY MIND?

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You have the **right** at **any time** to:

- **stop** the **questions** and **testing**,
- **stop** going to the **treatment sessions**, and
- **receive free counselling** if you want it.



If you **decide** to **withdraw** it **may not** be possible to **withdraw your data** from the study, however **all data** will be **coded** and **will not** identify you by name.



## HOW DO I CONTACT THE RESEARCHERS?

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Miranda Rose, Associate Professor, La Trobe University

Phone: (03) 9479 2776

Email: [compareaphasia@latrobe.edu.au](mailto:compareaphasia@latrobe.edu.au)



## WHAT CAN I CONTACT THE RESEARCHERS ABOUT?

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- any questions or concerns



## WHO DO I CONTACT ABOUT A COMPLAINT?

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If you have **any complaints** or **concerns** about your participation in the study that the researcher has not been able to answer to your satisfaction, you may **contact** the **Senior Human Ethics Officer**, Ethics and Integrity, Research Office, La Trobe University, Victoria, 3086 (P: **03 9479 1443**, E: [humanethics@latrobe.edu.au](mailto:humanethics@latrobe.edu.au)).

Please quote the application reference number 15-043.