VNIVERSITAT DE VALÈNCIA

Course Guide
35304 Speech Therapy Intervention in Sudden Brain Damage

COURSE DATA

Data Subject	
Code	35304
Name	Speech Therapy Intervention in Sudden Brain Damage
Cycle	Grade
ECTS Credits	4.5
Academic year	2022 - 2023

Study (s)

Degree	Center	Acad. year	Period
1203 - Degree in Speech Therapy	Faculty of Psychology and Speech Therapy	3	Second term

Subject-matter

Degree	Subject-matter	Character
1203 - Degree in Speech Therapy	27 - Speech therapy intervention in sudden brain damage	Obligatory

Coordination

Name	Department
BRINES BENLLIURE, LOURDES	268 - Psychobiology

SUMMARY

Acquired Brain Injury (ABI) is an injury that occurs in brain structures suddenly in people who were born without any brain damage, suffer at a later stage of life, injury to the same result an accident or illness. Among the main causes of ABI are Traumatic Brain Injuries (TBI) and Stroke. The first mainly affect young people, mostly men and the most important causes are traffic accidents and workplace accidents. Strokes affect an older population in which women predominate. As a result, affected individuals show deficits and disabilities that compromise the proper functioning independently in society. Physical deficits involve decreased grip or fine motor skills, limitations in walking, reduced vision or hearing, serious problems with speech or language or swallowing problems. However, cognitive-behavioral disorders and psychosocial follow the DCA tend to be undervalued, even when difficult and successful reintegration into society and make it impossible in many cases the purchase and maintenance of long-term employment. Among the most common cognitive deficits after brain damage are failures in language, memory, reduced attention and concentration, visuospatial problems, reduced reasoning skills and poor planning and organizational skills, deficits that significantly influence the communication skills and in rehabilitating them. So it´s urgent that a speech therapist work in this area given its importance to social status (130,000 stroke/year and 30,000 TBI/year).

PREVIOUS KNOWLEDGE

Relationship to other subjects of the same degree

1203 - Degree in Speech Therapy :

R4-OBLIGATION TO HAVE SUCCESSFULLY COMPLETED THE COURSE

35272 - Anatomy of Language and Hearing Organs

35273 - Physiology of Language and Hearing Organs

Other requirements

We find a relationship of this subject and others taught in the 1st year: Neurology and General and Language Neuropsychology. It is important and recommended for students to recover what they have learned in these subjects to activate previous knowledge and reflect on the impact of neurological pathologies on communication.

OUTCOMES

1203 - Degree in Speech Therapy

- Students must be able to apply their knowledge to their work or vocation in a professional manner and have acquired the competences required for the preparation and defence of arguments and for problem solving in their field of study.
- Students must have the ability to gather and interpret relevant data (usually in their field of study) to make judgements that take relevant social, scientific or ethical issues into consideration.
- Students must be able to communicate information, ideas, problems and solutions to both expert and lay audiences.
- Students must have developed the learning skills needed to undertake further study with a high degree of autonomy.
- Design and conduct speech therapy treatments, both individual and collective, by setting targets and stages, with the most effective and adequate methods, techniques and resources, and bearing in mind the different life developmental stages as well as gender perspective.
- Have an adequate speech production, language structure and voice quality.
- Know the different techniques of intervention in brain injury.
- Be able to plan an intervention in a clinical case of brain injury.

LEARNING OUTCOMES

-To design rehabilitation programs tailored to brain damage.
-Designing interventions with patients in coma stimulation and minimally responsive state.
-Apply and adapt the techniques and strategies of speech therapy in cases of brain damage.

DESCRIPTION OF CONTENTS

1. The Brain Injury.

Conceptual delimitation. Diagnostic criteria. Types of brain injury and classification criteria. Etiologies of brain injury.

2. Brain Injury: Role and functionality.

Model of the three functional units of the brain of R.A. Luria. Phases of attention to the brain damage: acute, subacute and chronic. Etiologic diagnosis and speech therapy. Role and functionality. International Classification of Functioning, Disability and Health (ICF). Functional Assessment Measure (FIM+FAM).

3. Speech therapy interventions in the neurogenic dysphagia

Neural Control of swallowing, phases and deglutitive times. Prevalence and etiology of oropharyngeal dysphagia is neurological in origin. Rehabilitative approach of neurogenic dysphagia.

4. Speech therapy in language and communication disorders in brain injury.

Plans and criteria for action on brain damage. Linguistic and communicative stimulation programs in acquired brain damage.

5. Child brain damage

Conceptualizations on child brain damage. Logopedic approach of communicative and oral nonverbal alterations secondary to brain damage in infancy.

6. Context and meaning in intervention in acquired brain damage: family, environment and communication.

The contents of this topic, due to its transversal character, will be treated throughout the development of the subject.

WORKLOAD

ACTIVITY	Hours	% To be attended
Theory classes	30,00	100
Laboratory practices	15,00	100
Study and independent work	67,50	0
TOTAL	**112,50**	

TEACHING METHODOLOGY

Lectures by power-point presentations and videos about intervention in brain damage.

Practices about how intervention programs in clinical cases with brain damage and videos of actual cases of patients on various interventions in brain damage.

Scheduled individual and group tutorials.

Supervision of practical work, guidance and resolution of doubts.

Seminars by prestigious guests in Brain Injury speech therapists.

Autonomous work / student: Build job, a review of clinical cases, intervention design, reporting. Study of student, preparation and conduct of the evaluation tests.

EVALUATION

The performance test on the level of knowledge acquired by the student in the theoretical and practical sessions will be carried out in the form of an exam with multiple choice multiple choice questions with 3 alternatives and five short questions. The exam may include one or more practical cases. It will be necessary to obtain a grade of 5 in this test to pass the course. In any case, the maximum mark in the test will be 60% of the overall mark. The remaining 40% will be obtained in the form of works whose characteristics will be detailed at the beginning of the teaching period of the practical sessions: preparation of speech therapy reports, management and interpretation of evaluation tests, development of speech therapy treatments in cases of brain damage, sessions of intervention.

The grades obtained in the work carried out will be saved for the June call. The task that are not submitted in the required time and form will not be recoverable.

Given the characteristics of the subject and the degree, a high command of written language will be required.

The teacher may require individual or small group interviews to verify the degree of participation and the achievement of the objectives pursued in any task carried out. Not accepting this verification will mean not passing the task / activity in question.

The manifest 'copy' of any test, task, activity or report, whether individual or group, that serves for evaluation purposes in the subject, will make it impossible to pass the subject matter.

In the event of fraudulent practices, the Action Protocol for fraudulent > practices at the University of Valencia will be applied (ACGUV 123/2020): https://www.uv.es/sgeneral/Protocols/C83.pdf

Honours degree will be awarded to those students whose grade in a subject is equal to or greater than 9 and the highest in their group. Obtaining honours is subject to taking an extraordinary oral exam in the event that two students have the same grade and it is only possible to award an honour degree. In no case will note subtract.

REFERENCES

Basic

- Luria, A.R. (1984). Conciencia y lenguaje. Madrid: Visor.
- Ardila, A. (2005). Las afasias. Guadalajara: Universidad de Guadalajara.
- Terradillos, E., y López-Higes, R, (2016). Guía de intervención logopédica en las afasias. Madrid: Síntesis.

Additional

- Melle, N. (2007). Guía de intervención logopédica en disartria. Madrid: Síntesis.
- Duffy, J.R. (2013). Motor Speech Disorders: substrates, differential diagnosis, and management. St Louis, Missouri: Mosby.
- Gallardo, B., y Hernández, C. (2013). Lingüística clínica. Arco Libros: Madrid.
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- Basso, A. (2012). La afasia: conocer para rehabilitar. Akadia
- : Clavé, P., y García, P. (Ed). (2011). Guía de diagnóstico y tratamiento nutricional y rehabilitador de la disfagia orofaríngea. Barcelona: Glosa.
- Diéguez-Vide, F. (2011). Cerebro y lenguaje. Madrid: Panamericana.
- Varios autores (2007). Logopedia y daño cerebral adquirido. Cuadernos FEDACE
- Benson, F., y Ardila, A. (1996). Aphasia. A Clinical Perspective. New York: Oxford University Press.