

Exploring the Coherence of Standard Aphasia Noun and Verb Naming Tests





Alexis Pracar^{1*}, Nina F. Dronkers^{1,2}, & Maria V. Ivanova¹

¹ Department of Psychology, University of California, Berkeley, CA, USA ² Department of Neurology, University of California, Davis, CA, USA

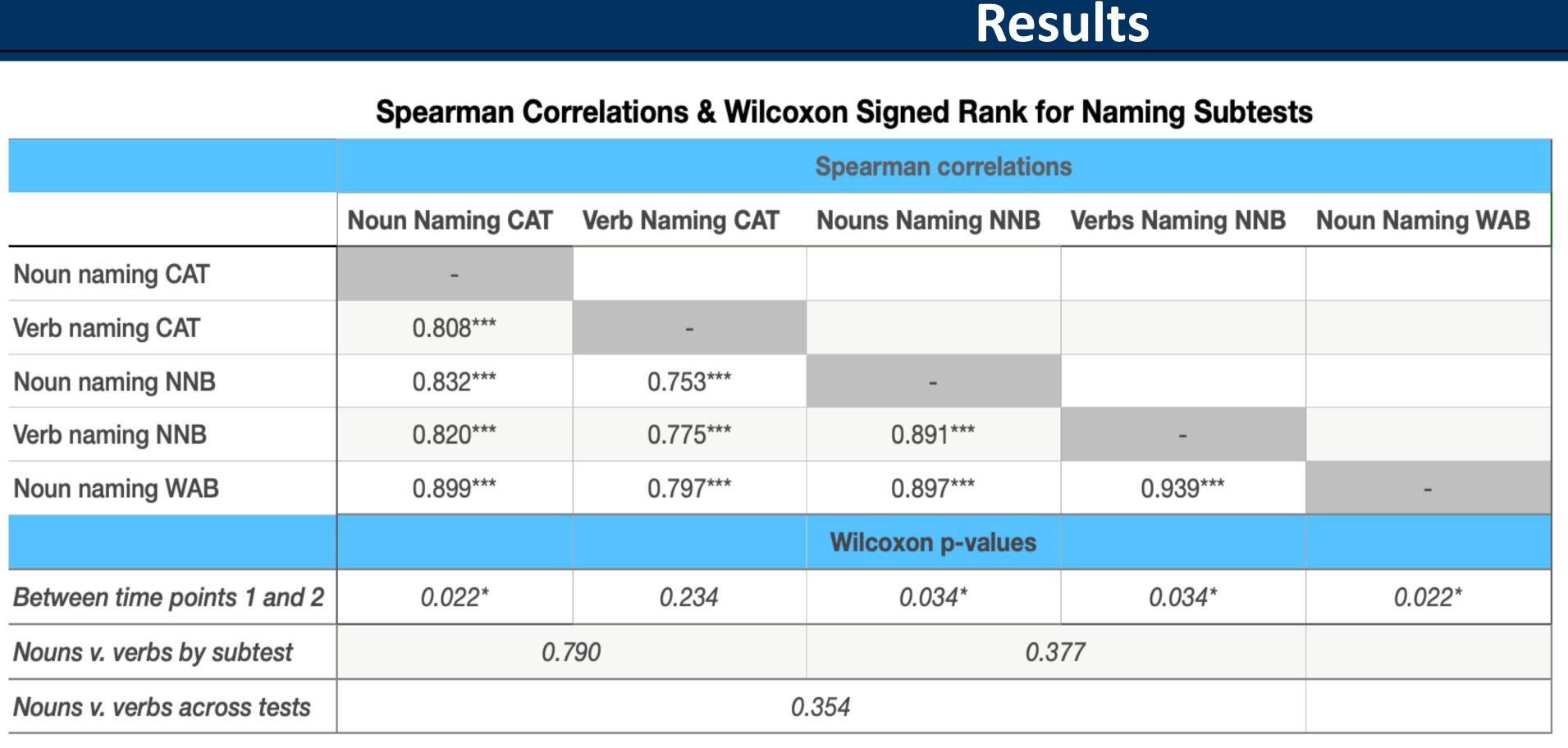
Introduction

How well is a naming deficit in the same patient captured by different tests?

- A naming deficit is the most common symptom across aphasia subtypes (Goodglass & Wingfield, 1997).
- People with aphasia can show differential impairments in verb and noun naming (Piras & Marangolo, 2007; Hillis et al., 2004, Mätzig et al., 2009).
- Many naming tests exist, but their interrelationship has not been extensively explored.
- It is not fully clear how noun naming ability is related to verb naming ability as measured by standardized language tests.

Methods

- 20 individuals with aphasia from left hemisphere stroke (time post-onset range: 1 month to 18 years), were given verb and noun naming subtests from the:
- 1. Northwestern Naming Battery (NNB; Cho-Reyes & Thompson, 2012)
- 2. Comprehensive Aphasia Test (CAT; Swinburn, Porter, & Howard, 2004)
- 3. Western Aphasia Battery (WAB; Kertesz, 2007)
- Spearman correlations were performed within and between naming subtests.
- In a subset of 8 PWA, we explored changes in the first-year post-stroke (1-, 3-, 12, and 24 months post) using the Wilcoxon Paired Signed Rank test.

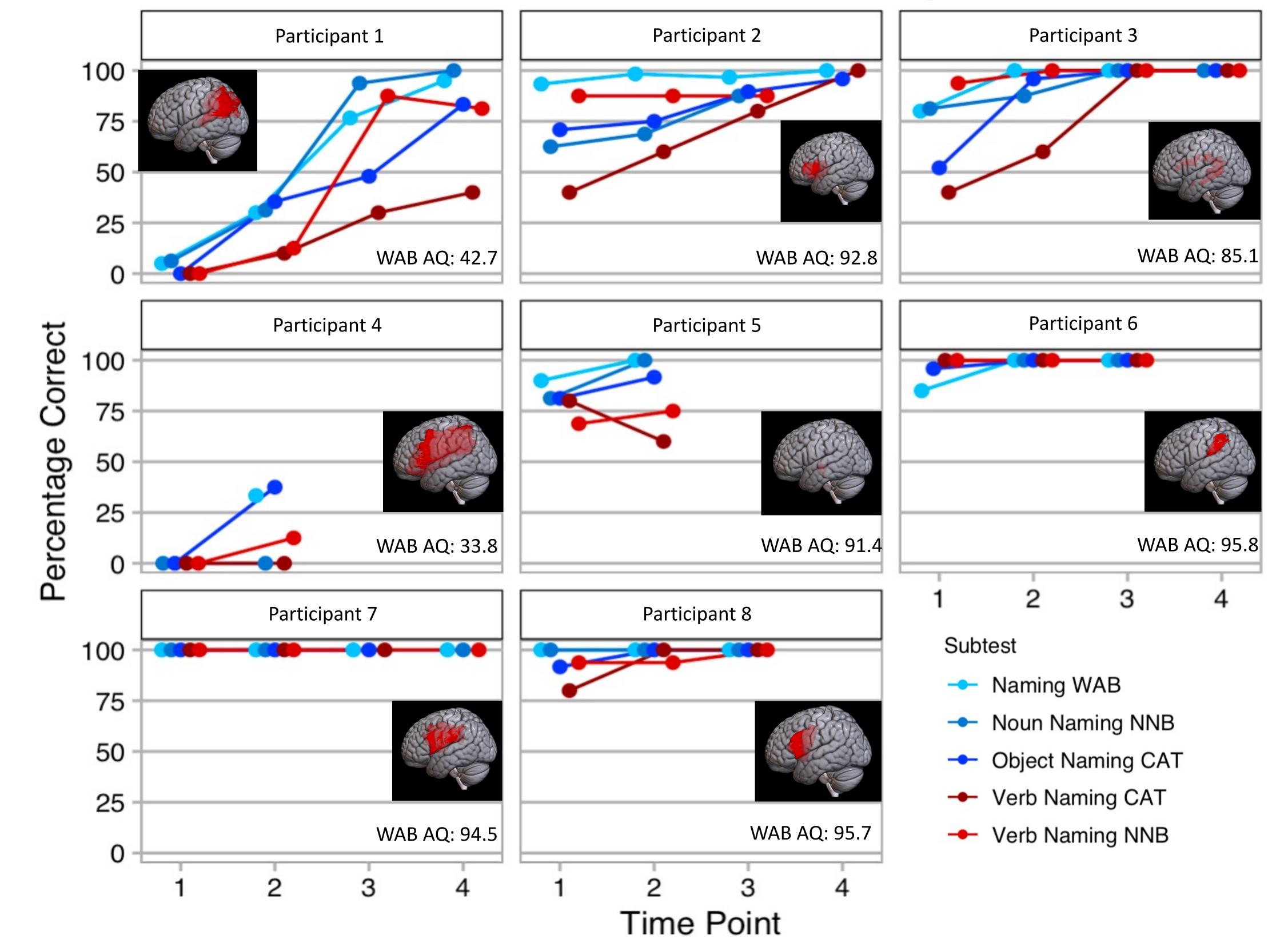


Using Spearman correlations, we found that all subtests for noun and verb naming were highly intercorrelated.

The Wilcoxon Paired Signed Rank test showed that participants predictably improved in the first 6 months on all tests but the CAT Verb Naming test.

The rate of change for verb naming underwent the greatest change in the first year. in a subset of 8 patients.

Performance on Standard Noun and Verb-Naming Tests Across Time



Discussion

- Standard noun and verb naming tests (CAT, NNB, WAB) provide consistent data characterizing language recovery from stroke.
- For research and clinical purposes, results from these naming tests can be directly compared.
- Descriptively, verb naming showed a steeper rate of recovery in the first year compared to noun naming, which will be further investigated in the cohort over time.
- The two individuals with suboptimal recovery had lesions to the posterior temporoparietal region, where damage is likely to cause poor recovery of language (Wilson et al., 2022; Crinion, 2007).
- Future studies could investigate the neural substrates that support differential rates of recovery in noun and verb retrieval.

References & Support

* Corresponding author: pracar@berkeley.edu, Contact for references

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