

**Acquired Disorders of Communication and  
Language**

Code: 43611  
ECTS Credits: 6

Degree	Type	Year	Semester
4315497 Communication and Language Disorders	OT	0	1

**Contact**

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**Use of Languages**

Principal working language: catalan (cat)

**Other comments on languages**

Poden haver articles redactats en llengua anglesa.

**Teachers**

Cristina Andrés Carrillo

**External teachers**

Mercè Casanovas  
Natalia Talleda  
Olga Viridiana Arreola

**Prerequisites**

For the correct development of the subject, students will have to have previous knowledge about the disorders acquired from communication and language, which can be the basis for the extension and updating of the theoretical-practical contents that will be worked on scheduled sessions

**Objectives and Contextualisation**

The general objective of this assignment is focused on research, diagnosis and neurorehabilitation and neurostimulating treatment in neurological and neuropsychological pathologies that address language and/ r speech disorders, both in childhood and in old age adult, secondary to idiopathic brain damage or acquired brain injury, and that affect the process of communication.

The specific objectives are:

1. Acquire the essential knowledge about the ethiopathogenesis and semiology of acquired disorders of language and speech in neurological and neuropsychological pathology.
2. To be able to develop an appropriate process of speech therapy assessment in these pathologies, according to the clinical acquired language disorder and/or speech presented by the patient of study.
3. To be able to design a suitable program of speech therapy intervention, either through neurorehabilitation or

by neurostimulation, considering a multidisciplinary approach to acquired language disorder and/or objective and secondary speech to a neurological pathology with a neuropsychological deficit.

## Competences

- Adjust and monitor speech therapy plans, depending on the evaluation and individual and social variables concurrent versus new and complex problems.
- Apply the fundamentals of bioethics and act according to the ethical code of the profession considering the cultural diversity and the limitations associated with various diseases.
- Apply the scientific method in professional practice.
- Collect, analyze and critically use sources of information necessary for the evaluation and speech therapy.
- Design and implement strategies to intervene from a biopsychosocial approach to facilitate the social inclusion of people affected by communication disorders and language.
- Develop professional practice from the perspective of quality and continuous improvement, able to evaluate and optimize.
- Master the skills and resources necessary to teamwork and multidisciplinary groups.
- Update, relate critically and apply to the professional activity of different theoretical frameworks on the processes of learning and acquisition of communicative processes.

## Learning Outcomes

1. Adapt performance in the field of acquired communication disorders and language the code of conduct.
2. Collect and provide advice and supervision of professional practice when necessary.
3. Conduct a critical reading of a scientific publication in the field of acquired communication disorders and language, based on the methodological quality of the research design used and the scientific practice of their results or contributions and relevance.
4. Conduct a systematic review in the field of acquired communication disorders and language to synthesize the best available scientific evidence.
5. Critically interpret the results of the tools and techniques relevant evaluation and exploration for speech therapy acquired disorders of communication and language.
6. Critically use the tools and techniques relevant evaluation and exploration for speech therapy acquired disorders of communication and language.
7. Deepen the knowledge of the cognitive processes involved in learning literacy related to acquired disorders of speech and language pathology in neurological and neuropsychological.
8. Deepen the knowledge of the processes involved in the acquisition of oral language related to acquired disorders of speech and language pathology in neurological and neuropsychological.
9. Design and implement strategies to raise awareness and social change to facilitate the inclusion of people affected by acquired communication disorders and language.
10. Design strategies for speech therapy acquired disorders of communication and adapted to the specificity of each language, attending to personal, family and social context.
11. Differentiate and proper use of procedures and technologies for teamwork in different roles.
12. Establish the objectives of the speech therapy of acquired communication disorders and language from an interdisciplinary perspective.
13. Identify and select speech therapy intervention strategies acquired disorders of communication and the most appropriate language in each case, taking into account the personal, family and social context.
14. Identify the relevant elements of the history and the initial interview for the evaluation of acquired communication disorders and language.
15. Proper use of procedures and technologies for effective communication between professionals in the field of acquired communication disorders and language.
16. Properly interpret the language of speech therapy sources of information not acquired disorders of communication and language used by other professionals.
17. Recognizing the need for additional scans, complementary sources of information collected on acquired disorders of communication and language.

## Content

1. Etiology of acquired brain damage.
2. Update and progress in research and evaluation of acquired brain damage.
3. Evaluation of brain lesions in children.
4. Evaluation of brain lesions in adults.
5. Update and progress in the neurorehabilitation of acquired brain damage.
6. Bases of language neurorehabilitation (aphasias, aging and dementia).
7. Basis for speech neurorehabilitation (disarthria and anarthria).
8. Basis of the neurorehabilitation of swallowing (dysphagia).
9. Technological innovation applied to speech therapy.

## Methodology

The contents of the subject will be based on guided activities: expository classes in face-to-face mode, lectures, problem-based learning and debates; supervised activities: tutorials; and autonomous activities: elaboration of written works, presentation of oral works, reading of articles and reports of interest and personal study. Attend a minimum of 80% of the sessions to be evaluated.

The proposed teaching and assessment methodologies may experience some modifications as a result of the restrictions on face-to-face learning imposed by the health authorities. The teaching staff will use the Moodle classroom or the usual communication channel to specify whether the different directed and assessment activities are to be carried out on site or online, as instructed by the Faculty.

Note: The teaching staff will allocate approximately 15 minutes of the last teaching class to allow students to answer the questions for the evaluation of the teaching performance and the evaluation of the subject or module.

Annotation: Within the schedule set by the centre or degree programme, 15 minutes of one class will be reserved for students to evaluate their lecturers and their courses or modules through questionnaires.

## Activities

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
Expositive classes	22.5	0.9	1, 7, 8, 10, 9, 12, 14, 13, 16, 5, 2, 17, 6
Learning based on problems and debates	9	0.36	1, 11, 10, 12, 14, 13, 16, 5, 17, 15, 6
Type: Supervised			
Tutorials	6.5	0.26	10, 12, 13
Type: Autonomous			
Elaboration of written works	20	0.8	3, 4, 14, 16, 5, 17, 6
Personal study	60	2.4	7, 8, 3, 4, 14, 16, 5, 17, 6
Presentation of written works	7	0.28	3, 4, 14, 16, 5, 17, 6

## Assessment

Three types of learning evidence will be performed: 1) attendance and participation in scheduled activities (individual) (EV1); 2) written delivery and/or oral defense of papers and reports (group) (EV2); and 3) closed written test with multiple-choice questions (individual). Students must have submitted all the learning evidence defined to be "assessable" and with a weight equal to or greater than 4 points (40%) of all the learning evidence submitted may not be included in acts as "not evaluable".

In order to calculate the average between the different grades, it will be essential to obtain a grade equal to or greater than 5 in the individual exercise and 3.5 in the rest of the activities. The module will be considered suspended when the average mark of the three evaluation activities is not exceeded with a 5.

In the 19th or 20th week of the semester, students will have the option of recovering the individual EV3 (multiple test) that they did not pass and previously presented. In order to access the recovery test, the teaching team may require having obtained a minimum average grade for the subject/module. In case of doing so, this mark will be equal to or less than 3.5. The individual written recovery will consist of a closed written test with multiple choice multiple choice questions about the theoretical content not passed.

No unique final synthesis test for students who enrol for the second time or more is anticipated.

normative link of the assessment:

<https://www.uab.cat/web/estudiar/graus/graus/avaluacions-1345722525858.html>

## Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
Assistance and participation in the programmed activities (individual)	50%	0	0	7, 8, 10, 12, 14, 13, 16, 5, 17, 6
Writing and/or oral defense of work and reports (group)	30	0	0	11, 10, 9, 3, 4, 12, 14, 13, 16, 5, 17, 15, 6
Written exam	40	0	0	1, 7, 8, 14, 16, 5, 2, 17, 6

## Bibliography

Fundamental Bibliography:

Triviño M, Arnedo M & Bembibre J. (2020). *Neuropsicología a través de casos clínicos*. Evaluación y rehabilitación. Madrid: Médica Panamericana.

Arnedo M, Bembibre J. & Triviño M. (2015). *Neuropsicología infantil a través de casos clínicos*. Barcelona: Médica Panamericana.

Artigas J. & Narbona J. (2011). *Trastornos del neurodesarrollo*. Barcelona: Viguera.

Chomel-Guillaume, S., Leloup, G. & Bernard I. (2010). *Les aphasies: évaluation et rééducation*. Paris: Masson.

Jurado M. Q., Mataró M. & Pueyo, R. (2014). *Neuropsicología de las enfermedades neurodegenerativas*. Madrid: Síntesis.

Tirapu, J., Rios, M. & Maestú, F. (2011). *Manual de Neuropsicología (2ª edición)*. Barcelona: Viguera.

Webb, W. & Adler, R. (2010). *Neurología para el logopeda*. Barcelona: Masson.

Further Reading:

Alberca, R. & López-Pousa S. (2011). *Enfermedad de Alzheimer y otras demencias*. Barcelona: Médica Panamericana.

Cuetos, F. (2012). *Neurociencia del Lenguaje*. Madrid: Médica Panamericana.

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De Noreña, D., Ríos-Lago, M, Bombín-González, I., Sánchez-Cubillo, I., García-Molina, A. & Tirapu-Ustárriz, J. (2010). Efectividad de la rehabilitación neuropsicológica en el daño cerebral adquirido: atención, velocidad de procesamiento, memoria y lenguaje. *Revista de Neurología*, 51 (11), 687-698.

Deví, J. & Deus, J. (2004). *Las demencias y la enfermedad de Alzheimer: una aproximación práctica e interdisciplinaria*. Barcelona: ISEP Universidad.

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Dieguez-Vide, F. & Peña-Casanova, J. (2012). *Cerebro y Lenguaje. Sintomatología neurolingüística*. Madrid. Médica Panamericana.

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Purves, D., Augustine, G.J., Fitzpatrick, D., Hall, W.C., Lamantia, A.S., Mcnamara, J.O. & Williams, S. (2007). *Neurociencia (3ª edición)*. Buenos Aires: Médica Panamericana.

Small, S.L. & Llano, D.A. (2009). Biological approaches to aphasia treatment. *Curr Neurol Neurosci Rep*. 9(6):443-50.

Stanfield, C. (2011). *Principios de fisiología humana*. Madrid: Pearson.

Subhash, C. & Orlando, J. (1997). *Neurociencia para el estudio de las alteraciones de la comunicación*. Barcelona: Masson.

Thibodeau, M. (2010). *Anatomía y fisiología humana*. Barcelona: Mosby.

Tresguerres, J. (2011). *Fisiología humana*. Madrid: Mc Graw Hill.

White, E.J., Hutka, S.A., Williams, L.J. & Moreno, S. (2013). Learning, neural plasticity and sensitive periods: implications for language acquisition, music training and transfer across the lifespan. *Frontiers in Systems Neuroscience*, 7, 90.

## **Software**

There is no.