

THE CENTER FOR SPEECH EXCELLENCE

Traumatic Brain Injury Fact Sheet

Definition: Traumatic brain injury (TBI) is caused by any direct injury to the brain or a closed head injury. Multiple language disturbances can be found in these individuals. The force of a blow to the skull extends to all parts of the brain, due to pressure waves, compression, tension, and shearing against bone.

Characteristics:

Individuals may exhibit any of the following:

- Word-finding difficulty
- Impaired visual and/or reading comprehension
- Auditory comprehension dysfunction
- Expressive language dysfunction
- Inability to write down what is understood
- Dysarthria- a disturbance in the motor control of speech
- Stuttered speech
- Confused language- speech and sentence structure may sound "right", but lacks meaning because it is irrelevant, illogical, or disorganized.
- Impaired organizational and retention skills for remembering and expressing information.
- Cognitive impairments are a major residual of closed head injury (CHI). Initially, inability to sustain concentration and impaired memory are usually reported.
- Impairments in selective attention and concentration
- Slower reaction/processing time
- Problems with analysis and synthesis of material
- Impairments nonverbal problem solving and abstract thought
- Difficulty organizing, structuring, and predicting the sequential order of thoughts. Causes problems dealing with different stimuli, structuring ongoing events, shifting from one mind-set to another, and altering/suppressing emotional reactions.
- Disoriented, disorganized, confused, focused on a specific part of an idea rather than the whole, reduced initiative, reduced inhibition.
- Inability to inhibit verbal expressions
- Inappropriate sequencing of words in a sentence or incorrect grammar
- Language difficulties may be due to a specific lesion (site of damage), as in aphasia, but most TBI problems result from cognitive disorganization.

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Assistance

We can offer the following assistance:

- Evaluation of language skills.
- A full report specifying deficit areas and their severity.
- Counsel with family, physicians, peers or others, as requested.
- Therapy to focus on improving language skills and thought organization.
- Regular periodic progress reports will be sent out regarding therapy.

*Adapted from "Language Disorders in Head Trauma", by Chris Hagen in **Handbook of Speech and Language Disorders**; edited by Janis M. Costello and Audrey L. Holland.*

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