

FOREWORD

The Times They Are A-Changin': Nontraditional Treatment Approaches to Communication Disorders

This issue of *Seminars in Speech and Language* serves to remind us (to quote the folk-singer Bob Dylan) that “the times they are a-changin’.” It appears that, at last, the bastion of so-called “Western medicine” has opened its doors to the possibilities that non-traditional practices may hold for improved health and rehabilitation.

Almost 20 years ago, one of my colleagues—who was a linguist, speech and language pathologist, and neuroimaging specialist at the Boston Veterans Administration Medical Center—became interested in acupuncture as an approach to improving dysarthria and hemiparesis resulting from strokes. She began a serious study of acupuncture methods, became licensed in this area, and even visited China where she observed acupuncture techniques used with stroke patients. She then wrote a grant to obtain funding for a controlled study of the use of acupuncture with appropriate patients. With some difficulty, she finally received permission from our Internal Review Board for Medical Research to submit the grant to an American organization willing to support “nontraditional” approaches to rehabilitation. Her project was funded and she began the study. I was able to observe, however, that during the length of the study her work was largely derided by the medical staff—including the chief-of-staff who was very vocal in expressing his opinion that such approaches as acupuncture were close to the “lunatic fringe” (thousands of years of Chinese medical history notwithstanding). Well, it gives me pleasure to reflect on how wrong he was about acupuncture, a method that by 1997 was the topic of a three-day conference at the National Institutes

of Health. The conclusion of the Consensus Statement that emerged from that conference was the following: “There is sufficient evidence of acupuncture’s value to expand its use into conventional medicine and to encourage further studies of its physiology and clinical value.”

At about the same time that my colleague was conducting her acupuncture study, the head nurse of our Aphasia and Neurobehavior Unit said to me, “All the patients are here because of stress. Sure, they’ve had strokes because of high blood pressure and diabetes but those conditions were caused by smoking and obesity, and stress is what caused them to smoke and overeat.” Similarly, our head-injured patients often had a history of alcohol abuse and we had patients who had survived drug overdoses with resultant brain damage. Of course, one of the reasons people abuse alcohol and other drugs is to make them feel better, feel less stressed. Well, it seems our head nurse was right; the relation between stress and health is now well established. Furthermore, many studies in the last two decades have demonstrated that people can improve their health by lowering stress levels through life changes and techniques such as meditation and yoga.

Aging specialists are actively exploring factors associated with healthy old age and several teams of investigators are concentrating on those who reach age 100. They are finding that healthy centenarians have been able to weather life’s difficulties with equanimity and acceptance. They are not worriers and do not dwell on the negative. Recently, I read an article in the local paper describing a longitudinal study of a large number of nuns and priests.

Those of the group who had a tendency to worry and feel stressed throughout their lives were significantly more likely to develop Alzheimer's disease. The researchers accounted for this finding by citing the damaging effects of stress-related chemicals produced in and affecting the brain over many years.

So, it appears that Western medicine is tuning in to all the factors that might affect our health, and that "alternative" approaches should be part of the treatment armamentarium. At the same time, however, few alternative approaches seem to have made their way into the field of communication disorders. This is somewhat surprising when one considers that, for example, the level of fluency achieved by those who stutter is greatly affected by stress; that conditions such as vocal polyps are directly associated with stress; that neurobehavioral phenomena such as perseveration can increase or decrease according to the pressure placed upon a patient; the fact that clinicians with a relaxed sense of humor may elicit a better performance from a person with aphasia than a stern clinician.

This issue of *Seminars in Speech and Language* is meant to motivate clinicians and

researchers to think about the effects of all human experiences on communication and its disorders, and to consider some alternative (and complementary) approaches to treating those who come under our care. Kristine Lundgren was a natural choice to serve as Guest Editor of this issue given that she has had a long interest in this topic and believes that such approaches have not been given enough consideration by speech and language pathologists. She has put together a group of papers that describe a variety of nontraditional treatment methods for communication disorders. As readers of these articles will observe, we are mostly in the "early days" of studying these nontraditional approaches. Still, the initial evidence is sufficiently strong to motivate clinicians to incorporate some of these approaches in their daily practices and to encourage clinical researchers to seek funding for well-controlled studies of some of the methods discussed herein. It is important that we continue to consider changes—including a change in mind-set that opens us to alternative modes of treatment.

Nancy Helm-Estabrooks, Sc.D.
*Guest Editor*¹