

## FOREWORD

Language is the primary medium of human social interactions. In spite of the fact that its use pervades most of our daily activities, its contributions ordinarily go unnoticed and unappreciated until it is disrupted. Indeed, when the complex neurological network that is responsible for these remarkable communication skills is damaged, as in severe aphasia, a person's ability to participate in many of life's most meaningful activities can be significantly and permanently impaired.

At present, over one million persons in the United States have aphasia, and the number is increasing at a current rate of about 100,000 new cases a year. Initial treatment of aphasia has traditionally emphasized an attempt to restore a person's ability to understand speech and to speak using conventional language forms. When aphasia is severe, however, and it becomes apparent that many residual communication disabilities will persist, some clinicians begin to explore ways in which a severely aphasic client's functional communicative effectiveness can be improved through

compensatory use of preserved abilities or alternative communication aids. This issue of *Seminars in Speech and Language* focuses on evaluating and managing the communication disabilities of severe aphasia.

My decision to ask Nancy Helm-Estabrooks to serve as guest editor for this issue was an easy one. She has earned an international reputation for her research and innovative clinical work with chronic, severe aphasia at the Aphasia Research Center of Boston University School of Medicine and, more recently, at the National Center for Neurogenic Communication Disorders at the University of Arizona. Moreover, her office was just a short elevator ride away. As I expected, she assembled a talented group of clinicians for this issue who know this clinical population well. The clinical insights they share constitute a remarkable collection of strategies and procedures that can benefit patients having severe aphasia.

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