A red line under the title of this fact sheet.Communication problems and brain tumours

The ability to communicate is something many of us take for granted. Communication allows us to tell people who we are and how we feel. Communication difficulties can make us feel isolated from the world. If people around us have some understanding of the communication difficulties we are experiencing, it can help them to support us and to reduce feelings  
of isolation.

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## How can brain tumours affect communication?

How a brain tumour affects you will depend where it is in the brain. If the tumour occurs in certain parts of the brain (usually in the left hemisphere) it may cause communication difficulties. Surgery may also cause communication difficulties if the area of the brain operated on is involved in communication. Such difficulties can also occur as a result of increased pressure on the brain that a tumour creates.

## What communication difficulties may someone with a brain tumour experience?

If you have a brain tumour, you may experience a range of different communication difficulties. These could include slurring words or more commonly, difficulty saying words or you may get them mixed up. The most common communication difficulty experienced by people with brain tumours is [aphasia](http://www.thebraintumourcharity.org/NR/exeres/05EFEFD0-1D42-4972-BF9A-3F7FB7C3012F,frameless.htm?NRMODE=Published#MainControl_Glossary_ZoneMain_GlossaryPlaceholderControl1_ctl00_PresentationModeControlsContainer_SECTION_A) (also known as dysphasia).

## What is aphasia?

Aphasia affects language abilities. It can affect a person’s speech and ability to write. In some cases, it also affects the ability to understand speech and writing. Aphasia does not affect intellect although, unfortunately, this is a common misperception.

Aphasia can vary in the degree of difficulty it causes with communication, and it can sometimes affect just one aspect (e.g. the ability to write), although it is more common for several aspects to be affected. In people with brain tumours, the severity of the aphasia can progress as the tumour grows.

The three most common types of aphasia are: Broca’s aphasia, Wernicke’s aphasia and global aphasia. Each are associated with different difficulties. The type of aphasia experienced depends upon which part of the brain and how much of the brain is affected.

## Broca’s aphasia

Broca’s aphasia is also sometimes called ‘non-fluent aphasia’ or ‘expressive aphasia’. It describes a condition where the person has difficulty speaking and can only produce a small number of words in halting sentences, for example “want … tea … sugar”. It is usually possible to understand the person’s speech, but it may take them some time to say what they want  
to say.

People with Broca’s aphasia may:

* not be able to speak at all
* have difficulties speaking or writing in full sentences and may only use one or two words
* speak with pauses or not be able to say the word they would like to say
* get words muddled up (for example saying “wife” instead of “daughter”) and confuse “yes” and “no”
* be able to describe an object but not name it
* only be able to say a few words, which may be linked to emotions and could be swear words

Although individuals with Broca’s aphasia will not always be aware that   
their speech is not as they intend, they will be aware that they have a communication difficulty.

## Wernicke’s aphasia

Wernicke’s aphasia, also known as ‘fluent aphasia’ or ‘receptive aphasia’, affects language comprehension and the ability to produce meaningful language. A person with Wernicke’s aphasia often has speech that sounds fluent and has a normal rhythm, but is in fact made up of ‘non words’ and is therefore meaningless. The person may be unable to understand what others are saying, which can leave them feeling frustrated.

A person with Wernicke’s aphasia may also:

* not understand long sentences and forget the beginning of what has  
  been said
* have difficulty understanding if there is background noise or several people speaking at once
* be able to read headlines but not the main body of the text
* be able to write but not read back what they have written

In general, someone with Wernicke’s aphasia will not be aware that they have a communication difficulty.

## Global aphasia

Global aphasia is sometimes called ‘related aphasia’ or ‘pictorial aphasia’. It is the most severe form of aphasia. A person with global aphasia usually has symptoms of both Broca’s and Wernicke’s aphasia. Their difficulties are with all forms of communication, including:

* speaking and understanding others’ speech
* reading and writing
* repeating words back
* naming objects, people or places

## What might help communication?

There are some simple changes you can make that may help you if you are experiencing communication problems. As communication is a two way process, the way that those around you communicate with you is also very important. One of the key ways they can help is to be supportive and to   
adapt the way they communicate in order to facilitate your understanding and self expression.

## If you are experiencing communication difficulties:

* Try to create a relaxed environment - aphasia often worsens with stress
* Reduce background noise and distractions
* Consider taking a break if you are tired.

## If someone you care for is experiencing communication difficulties:

* Don’t rush your speech - speak clearly and at a steady pace
* Give one point at a time rather than all of the information at once
* Don’t be tempted to speak more loudly - remember that the person does not have a problem with hearing
* If the person has not understood you, try rephrasing what you have said
* Take care not to talk down to the person with the communication difficulty, and bear in mind that the problem is not with their intelligence
* Use all forms of communication, including mime, gesture, intonation, writing, drawing, and facial expressions
* Don’t pretend to understand what the person has said if you do not. Their intelligence is not affected by aphasia and you could leave them feeling very frustrated
* Make giving answers easy. F or example, instead of asking “Would you like tea or coffee?”, you could ask, “Would you like tea?”
* If the person is having difficulty with a particular word, you could ask them to describe it instead
* Don’t interrupt or fill in words for a person unless they ask you to
* Consider taking a break if you are both tired

## What other difficulties may someone with aphasia face?

An individual with aphasia may feel very isolated. This could be because they find it difficult to understand others and / or to be understood. They might also feel embarrassed and so avoid situations where they would need to communicate. A person with aphasia may feel emotionally ‘cut off’ from those around them.

They may experience difficulties understanding humour, or find it hard to match what they are saying with their tone of voice and facial expressions. Depression is not uncommon in people affected by aphasia (*see our fact sheet on brain tumours and depression).*

## What interventions are available to help with speech and communication problems?

Aphaisa is commonly caused by a one off event (for example, a stroke or a head injury) and, in these circumstances, some degree of natural recovery is usual. When a brain tumour is the cause, however, aphasia may actually worsen if a tumour grows.

Aphasia can also be the result of neurosurgery and, if this is the case, the individual may be referred to a speech and language therapist (see our fact sheet on the multidisciplinary team)

A speech and language therapist (SLT) will work with the person towards three key goals:

* Relearning lost or damaged communication skills (if possible).
* Making the best use of remaining communication skills.
* Finding new ways of communicating.

In order to offer the best help, the SLT first carries out an assessment and then works with the person using various tools and exercises.

## Who can offer support with communication difficulties?

While The Brain Tumour Charity cannot recommend any specific organisations, the following organisations provide support with communication difficulties:

**Speakability**

Provides information and support groups  
1 Royal Street, London, SE1 7LL  
[www.speakability.org.uk](http://www.speakability.org.uk)   
0808 8089572

**Brain and Spine Foundation**

Provides information and support on neurological disorders for patients, carers and health professionals  
3.36 Canterbury Court, Kennington Park, 1-3 Brixton Road, London, SW9 1HL  
[www.brainandspine.org.uk](http://www.brainandspine.org.uk)   
0808 808 1000

**Connect**

A charity for people living with aphasia. They provide meet-ups, a coffee shop and counselling  
16 - 18 Marsalsea Road, London, SE1 1HL  
[www.ukconnect.org](http://www.ukconnect.org)   
0207 367 0840

**Lynne Liddle Brain Cancer Trust**

Can provide iPads to brain tumour patients to help them communicate.   
[www.lynneliddlebraincancertrust.co.uk](http://www.lynneliddlebraincancertrust.co.uk)

**The Royal College of Speech and Language Therapists**

Offer speech and language therapy services  
2 White Hart Yard, London, SE1 1NX  
[www.rcslt.org](http://www.rcslt.org)

# What if I have further questions?

If you require further information, any clarification of information, or wish to discuss any concerns, please contact our Support and Information Team.

* Call 0808 800 0004 (free from landlines and most mobiles including 3, O2, Orange, T-mobile, EE, Virgin and Vodafone)
* Email [support@thebraintumourcharity.org](mailto:support@thebraintumourcharity.org)
* Join our online forums at [www.thebraintumourcharity.org/forums](http://www.thebraintumourcharity.org/forums)

# About us

The Brain Tumour Charity makes every effort to ensure that we provide accurate, up-to-date and unbiased facts about brain tumours. We hope that these will add to the medical advice you have already been given.

Please do continue to talk to your doctor if you are worried about any medical issues. We are the UK’s leading brain tumour charity. We fund scientific and clinical research into brain tumours and offer information and support to those affected, whilst raising awareness and influencing policy.

We rely 100% on charitable donations to fund our vital work. If you would   
like to make a donation, or want to find out about other ways to support us including fundraising, leaving a gift in your will or giving in memory, please visit us at [www.thebraintumourcharity.org](http://www.thebraintumourcharity.org) or call 01252 749043.

# About this fact sheet

This fact sheet has been written and edited by The Brain Tumour Charity’s Support and Information Team. The accuracy of medical information has been verified by a leading neuro-oncologist. Our fact sheets have been produced with the assistance of patient and carer representatives and up-to-date, reliable sources of evidence. If you would like a list of references for any of the fact sheets, or would like more information about how we produce them, please contact us.

# Communication problems and brain tumours

# Your notes



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