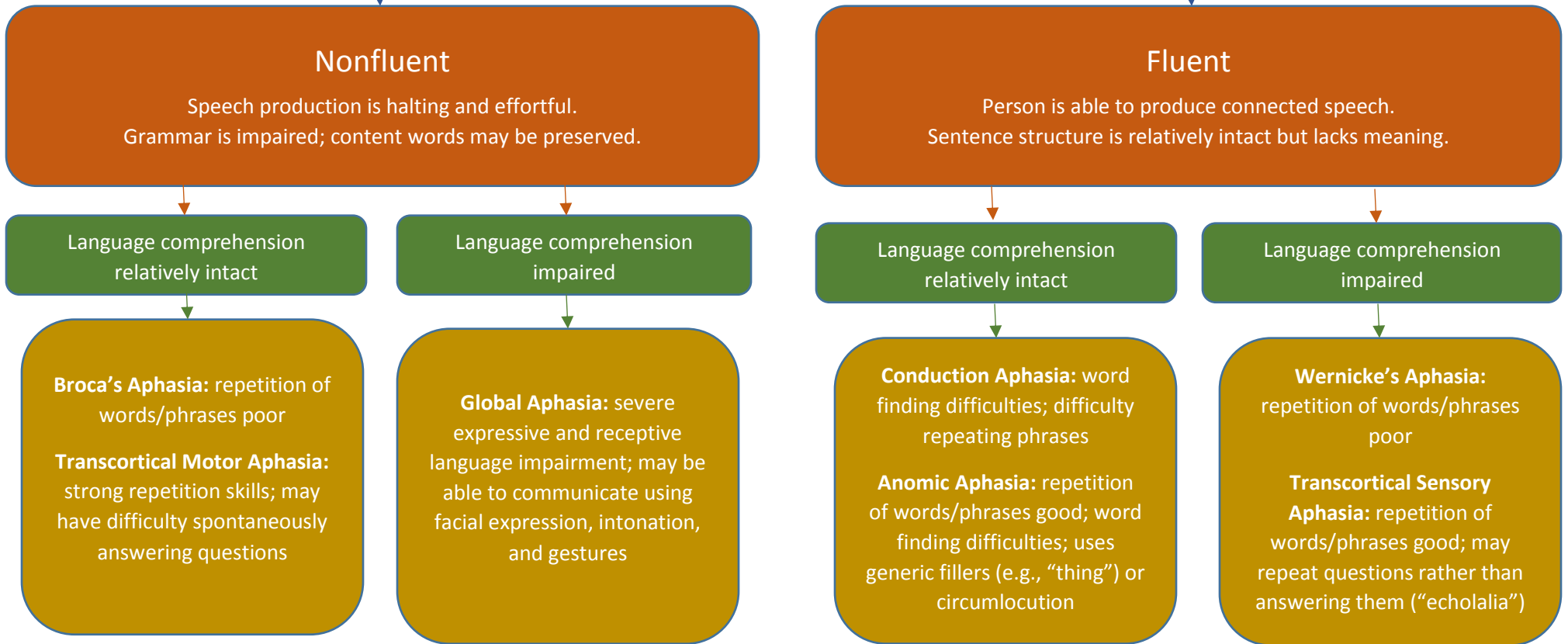


# Classification of Aphasia



This figure describes various aphasia types, using a classification system based on characteristics of verbal expression (nonfluent or fluent; Davis, 2007; Goodglass & Kaplan, 1972).

**Crossed aphasia** and **subcortical aphasia** are considered "exceptional aphasias," as they do not fit neatly within this or other common classification systems. **Crossed aphasia** occurs when a person demonstrates language impairment after suffering damage to the hemisphere on the dominant side of the body, rather than the alternate side. Thus, a right handed person who develops aphasia following a right hemisphere stroke exhibits crossed aphasia. **Subcortical aphasia** results from damage to subcortical regions of the brain (e.g., thalamus or basal ganglia), and symptoms can mirror those that arise from cortical lesions.

**Primary progressive aphasia (PPA)**—despite its name—is a type of dementia. It is characterized by gradual loss of language function in the context of relatively well-preserved memory, visual processing, and personality until the advanced stages (Mesulam, 2001; Rogers, 2004). For more information about **PPA**, see ASHA's Practice Portal page on [Dementia](#).

Davis, G. A. (2007). *Aphasiology: Disorders and clinical practice* (2nd ed.). Needham Heights, MA: Allyn & Bacon.

Goodglass, H., & Kaplan, E. (1972). *The assessment of aphasia and related disorders*. Philadelphia, PA: Lea & Febiger.

Mesulam, M. (2001). Primary progressive aphasia. *Annals of Neurology*, 49, 425-432.

Rogers, M. (2004). Aphasia, primary progressive. In R. D. Kent (Ed.), *The MIT encyclopedia of communication disorders* (pp. 245-249). Cambridge, MA: MIT Press.