**METHODS**

1. Determine topic of conversation and choose 16 words/phrases with Ss and partners based on autobiographical memory.
2. Make personalized boards with 16 photos + labels on 17” X 11” cardboard.
3. Train Ss how to use boards during conversation in their residences.
4. Conduct 6 VERY controlled conversations between Ss and RAs with 10 scripted questions to elicit words/phrases; 3 with and 3 without boards.
5. Provide 3 prompts (downshift questions) to elicit target words if not produced. The same prompts are offered in identical order for conversations with and without AAC.
6. Measure outcome variables: #correct responses to questions + prompts in AAC-supported and unsupported conversations.

**RESULTS**

**BACKGROUND**

**Communication treatment goals for PPA:** To place the patient’s residual lexicon visually in front of him to access needed vocabulary for daily expression as language skills decline. There are no empirical data showing that augmentative & alternative communication (AAC) helps with language compensation in PPA.

**Research goal:** To demonstrate that Ss with PPA retrieve words faster, with less effort during AAC-supported conversations compared to unsupported conversations. To demonstrate that AAC reduces the amount of lexical scaffolding needed by conversational partners.

**SUBJECTS**

- **N = 17,** diagnosed with PPA
- **Gender:** 8 women; 9 men
- **Age range:** 52-80 years; **X = 69**
- **Education:** 12-24 years; **X = 16.5**
- **CDR:** .94 – 1.08; **X = 1**
- **BNT:** 2-52; **X = 25**
- **WAB:**
  - Word fluency: 0-12; **X = 6.0**
  - Oral naming: 1-58; **X = 37.7**
  - Repetition: 38-96; **X = 64.7**
  - Aud-Vrb Comp: 48-60; **X = 55.1**

**PERSONALIZED COMMUNICATION BOARDS**

Number of correct verbal responses to all questions was higher in the experimental condition (with AAC) than in the control condition (without AAC).

- **Mean Control:** 5.4
- **Mean Experimental:** 7.1
  
  \[ F(1,87) = 6.714, \ p = .011 \]

**Participants with PPA retrieve the correct verbal responses to questions more frequently with AAC support than without AAC support.**

Ss pointed to board pictures an average of 5 times/conversation, indicating that they are using boards for expression, not just cuing word retrieval.

**CONCLUSION**

- Experimental data prove that low tech AAC provides meaningful lexical support during structured conversations for people with PPA.
- Low tech AAC significantly reduces lexical scaffolding needed by the conversation partner.
- This approach should be part of a PPA treatment protocol.

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