



Amyotrophic Lateral Sclerosis [ALS]

Education & Counseling

ALS is a difficult diagnosis, but SLPs matter to impact the quality of life of these individuals. One way to provide hope [hope as choosing positivity against great odds or uncertainty!] is to provide education and counseling. See further details about References, research summary, and treatment candidacy within the [Activity Studio](#).

The Ways SLPs Impact Quality of Life in ALS

- SLPs make a difference in Quality of Life! (Soofi et al., 2017). Clients with ALS have expressed that the work we do is important and affects quality of life (we do this through education, supporting participation, counseling, and incorporating meaningful goals).

These skills improve quality of life because they are all also tied to HOPE!

Soofi, A. Y., Bello-Haas, V. D., et al. (2017). The impact of rehabilitative interventions on quality of life: a qualitative evidence synthesis of personal experiences of individuals with amyotrophic lateral sclerosis. *Quality of Life Research*, Epub ahead of print retrieved February 15, 2018 from <http://dx.doi.org/10.1007/s11136-017-1754-7>.

How To Respond in Difficult Conversations

- Pause, Listen, Empathize, and Validate during “counseling moments.”

Holland A.L., & Nelson, R.L. (2020). *Counseling in Communications Disorders: A Wellness Perspective*. 3rd ed. United States: Plural Publishing Inc.

Connect with Resources

- Connecting with others and resources may help a person with ALS feel less “alone.”

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AAC & Communication

See further details about References, research summary, and treatment candidacy within the [Activity Studio](#). While this list is not all-inclusive, there are efforts made to include treatments that are current and can be integrated with personally-relevant goals.

Consider AAC [no-tech, low-tech, high-tech]

- AAC can improve quality of life for those with ALS (Korner et al., 2013)
- AAC must be focused on real life needs (Foley 2012)
- AAC can be effective and impact patient satisfaction over teletherapy (Roman et al., 2021)

Fried-Oken, M., Mooney, A., & Peters, B. (2015) Supporting communication for patients with neurodegenerative disease. *NeuroRehabilitation*, 37(1), 69-87.

Focus on Topics that Matter

Fried-Oken, M., et al. (2015). What's on your mind? Conversation topics chosen by people with degenerative cognitive-linguistic disorders for communication boards. *American Journal of Speech-Language Pathology*, 24(2), 272-280.

Consider Message Banking

Consider Voice Banking

Consider Strategies to help Communication Needs

Fried-Oken, M., Mooney, A., & Peters, B. (2015) Supporting communication for patients with neurodegenerative disease. *NeuroRehabilitation*, 37(1), 69-87.

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Dysphagia Needs

See further details about References, research summary, and treatment candidacy within the [Activity Studio](#). While this list is not all-inclusive, there are efforts made to include treatments that are current and can be integrated with personally-relevant goals.

Education and Involvement in Decisions

- [Swallowing Changes in ALS](#)
- [Feeding Tube Placement Considerations](#)
- [Texture Changes](#)

Bedore, B. (2013). Management of dysphagia in individuals with amyotrophic lateral sclerosis. *Perspectives on Swallowing and Swallowing Disorders*, 22(1), 26-31.

[Strategies for Managing Secretions](#)

Bedore, B. (2013). Management of dysphagia in individuals with amyotrophic lateral sclerosis. *Perspectives on Swallowing and Swallowing Disorders*, 22(1), 26-31.

[Strategies for Managing Dysphagia Symptoms](#)

Ashford, J., et al. (2009). Evidence-based systematic review: Oropharyngeal dysphagia behavioral treatments. Part III—Impact of dysphagia treatments on populations with neurological disorders. *Journal of Rehabilitation Research and Development*, 46(2), 195–204.

[Energy Conservation Strategies for Eating](#)

Reference: Bedore, B. (2013). Management of dysphagia in individuals with amyotrophic lateral sclerosis. *Perspectives on Swallowing and Swallowing Disorders*, 22(1), 26-31.