



NSW Speech Pathology Evidence Based Practice Interest Group

Critically Appraised Paper (CAP)

CLINICAL BOTTOM LINE: 1. Children who have language difficulties at age 5,6 are at considerable risk of having SLI and academic difficulties. 2. Children whose language difficulties resolve early, have good prognosis for spoken language development but residual mild processing impairments that place them at risk of later failure (eg literacy skills)

Clinical Question [patient/problem, intervention, (comparison), outcome]: What are the long term speech and language outcomes for children with resolved SLI, persistent SLI and general delay (IQ below 70) as compared to the performance of controls at follow up?

Search Terms: speech-language impairment, language outcomes, pre-school language impairment, follow up

Search Systems: CINAHL

Citation: Stothard, S.E., Snowling, M. J., Bishop, D.V.M., Chipchase, B.B., Kaplan, C.A. (1998). Language-impaired preschoolers: A Follow-up into Adolescence. *Journal of Speech language and Hearing Research*, 41, 407-418

Design: Case-Control study

Participants: Initial study at 4 years identified SLI and general language age delay based on specified criteria. N=87. Follow up N=71 and compared to 49 controls with a history of normal language development

Experimental Group: N=71 Adolescents with a history of pre-school language impairments, from social class-3 (from Bishop and Edmundson, 1987)-%80 males. 26 kids with resolved SLI, 30 kids with persistent SLI, 15 kids with general delay (IQ below 70 at age 5, 6)

Control Group: N=49, 26 kids volunteers, 26 randomly selected

Results: 1. The resolved SLI group performed better than persistent SLI group who did not differ from general delay group. 2. Resolved SLI performed similar scores to the control group apart from sentence repetition, non-word repetition and spoonerisms where they performed at a significantly lower level (i.e. they showed subtle phonological processing difficulties) 3. Control's literacy ability was better than resolved SLI, which was better than persistent SLI/delay group. 4. Persistent SLI deteriorated by age 15 years.

Comments on Design: Query use of 70 non-verbal IQ rather than full scale IQ. It is important to look at individual profiles of language level and verbal/nonverbal IQ. Possibly persistent SLI have lower IQ. Query using WISC as part of a language battery in verbal reasoning. Need to look at academic achievement as a functional measure eg school certificate/year 7 ELLA.

Level of Evidence (NH&MRC): level 3 (2)

Appraised By: Paediatric language group

Date: 12.12.02