

# Language comprehension and cognitive orientation switching in Broca's syndrome and Parkinson's disease

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**Abstract.** This paper reviews researches on sentence comprehension deficits and the cognitive orientation switching abilities in two neurological disorders – Broca's aphasia and Parkinson's disease (PD). Both patient groups exhibit challenges in sentence comprehension. Individuals with Broca's aphasia show reduced lexical activation and struggle with processing syntactic information when comprehending sentences. While they may retain some comprehension abilities, complex grammatical processing is significantly hindered. In PD, sentence comprehension deficits arise from disruptions in attention, executive control, and action-language networks in the brain which are critical for integrating linguistic information. Regarding cognitive orientation switching, patients with both Broca's aphasia and PD demonstrate impairments, likely due to dysfunction in frontal brain regions that enable flexibility in thinking. Broca's patients struggle with changing response strategies, while PD patients have difficulty learning new classification rules and are challenged by distractions. There is evidence that reduced cognitive switching abilities can interfere with effective syntactic processing during sentence comprehension. The review highlights neurological underpinnings and manifestations of comprehension and cognitive flexibility deficits in these two disorders. Further research can provide greater insight into the nuanced interactions between language and domain-general cognition.

**Keywords:** Broca's Syndrome, Parkinson's Disease, Language Comprehension, Cognitive Orientation

## 1. Introduction

Language comprehension and cognitive flexibility are fundamental cognitive processes that underpin human communication and problem-solving. Among the many language-related disorders, Broca's syndrome and Parkinson's disease have emerged as significant subjects of investigation, revealing profound implications for sentence comprehension and the cognitive orientation switching abilities. While Broca's syndrome is traditionally associated with impairments in expressive language and speech production, recent research has highlighted its impact on sentence comprehension, making it crucial to understand the interplay between language production and comprehension deficits in this disorder [1]. Similarly, Parkinson's disease, primarily known for its motor impairments, has increasingly been recognized for its effects on sentence comprehension and cognitive orientation switching [2]. However, there have not been effective treatments that target the two diseases.

This paper discusses the effects of Broca's syndrome and Parkinson's disease on sentence comprehension and cognitive orientation switching abilities and the relationships between the two abilities. It will also provide some potential therapeutic strategies and interventions to ameliorate sentence comprehension deficits and cognitive orientation switching impairments in individuals with Broca's syndrome and Parkinson's disease.

## **2. Sentence Comprehension Deficits**

Language comprehension is a complex cognitive process that underlies a human's ability to understand, interpret, and extract meaning from spoken or written communication. The seamless integration of linguistic elements, syntax, and semantics allows us to construct coherent mental representations of the world around us, facilitating effective communication and information processing. However, this intricate cognitive process is susceptible to disruption in various neurological disorders, leading to a range of sentence comprehension deficits that significantly impact an individual's language abilities [3].

### *2.1. Sentence Comprehension Deficits in Broca's syndrome*

Broca's area is a region located in the left frontal lobe of the brain named after the French physician Paul Broca. Based on the theories of phrenology, Broca put forward that injuries to Broca's area can result in aphasia [4], which is called Broca's syndrome. However, this theory turned out to be wrong, according to later clinical evidence. It has been found that injuries to Broca's area do not necessarily influence language abilities [5]. It is subcortical lesions that cause the aphasia [6-8].

Lexical activation is a common phenomenon in humans. When a person reads or hears a word, the corresponding lexical representation in their mental lexicon becomes activated, allowing them to access the meaning and other linguistic information associated with that word. This activation is thought to occur rapidly and automatically, even when words are encountered in sentences or phrases within a larger context. However, this ability is reduced in patients with Broca's syndrome. Utman et al. [9] found that compared with normal people, Broca's aphasics show a larger and longer reduction when dealing with word-initial phonological distortions, but only a weak reduction when it comes to word-final phonological distortions. Damage to Broca's area can impair language reaction, but comprehension may still be preserved.

Although patients with Broca's aphasics are not able to speak grammatically, they may have the ability to judge the grammaticality of a sentence, though with a high error rate [10]. Zurif et al. [11] demonstrated that while Broca's aphasics struggle to grammatically sort words as proficiently as the control group, their performance does indicate a certain level of comprehension. Caramazza and Zurif [12] provided compelling evidence that Broca's aphasics exhibit a distinct inability to engage in syntactic algorithmic processes, revealing a pronounced dissociation between heuristic and algorithmic mechanisms in their language comprehension.

### *2.2. Sentence Comprehension Deficits in Parkinson's Disease*

Parkinson's disease (PD) is characterized by the gradual degeneration of dopamine-producing neurons in the brain, particularly in the substantia nigra. This disruption in dopamine transmission has been linked to a range of cognitive and linguistic impairments, including sentence comprehension deficits [13]. While Parkinson's disease is primarily known for its motor symptoms, non-motor symptoms such as language and cognitive dysfunction have increasingly garnered attention.

Comprehending complex sentence structures necessitates intricate attention and executive control mechanisms. Parkinson's disease's disruption of these mechanisms exacerbates sentence comprehension deficits. Crucial regions, such as the motor cortex, parietal cortex, and the mirror neuron system, which are adversely affected by the disease, are instrumental in action-language processing [14-16]. The compromised functionality of these regions translates to challenges in effectively processing and integrating linguistic elements within sentences, particularly in instances of action concepts.

Furthermore, the disease leads to event-semantic deficits, impairing the ability to connect verbs with appropriate actions or contextual situations. This deficit significantly impacts sentence comprehension,

given that understanding relationships between sentence elements relies on event-semantic knowledge. Godbout and Doyon [17] found that people with PD exhibit poorer performance when describing sequences of intricate activities. The disruptions in event-semantic knowledge compound the difficulties in constructing coherent mental representations of sentences on the fly.

Despite the various deficits shown above, a recent study has found that individuals with PD displayed robust online prediction effects, despite the disease's impact on their actions and event knowledge [18]. This suggests that individuals with PD still possess the ability to generate predictions about upcoming words or concepts in a sentence based on contextual cues. However, it is worth noting that some researchers, such as Huettig [19], believed that PD patients may face challenges in processing predictive contexts when the content becomes more complex or less straightforward. This implies that while individuals with PD may retain some predictive processing abilities, their performance in this regard could be influenced by the complexity and clarity of the linguistic context they are presented with. Further research is necessary to explore the factors that contribute to the interplay between PD and predictive processing abilities, as well as to develop strategies that can enhance sentence comprehension in individuals with Parkinson's disease.

### **3. Cognitive orientation switching abilities**

Cognitive orientation switching abilities refer to an individual's capacity to establish and modify cognitive criteria for interpreting and responding to different situations or tasks. This cognitive flexibility enables individuals to adapt their cognitive strategies and mental frameworks based on contextual demands, goals, and shifting environmental cues. The ability to switch between cognitive orientations is crucial for efficient problem-solving, decision-making, and successful navigation of complex and dynamic situations [20].

Wisconsin Card Sorting Test (WCST) is a neuropsychological assessment that involves matching response cards to stimulus cards containing various colors and shapes. It measures an individual's proficiency in classification, generalization, working memory, and cognitive transfer [21]. This test has been utilized to evaluate the cognitive orientation switching abilities of individuals with neurodegenerative disorders. By examining their performance on the WCST, researchers gain insights into the cognitive flexibility and adaptability of patients with these diseases.

In a similar vein, the "Odd-Man-Out (OMO)" test, devised by Flowers and Robertson in 1985 [22], further underscores the dynamic nature of cognitive orientation switching. This test challenges subjects to recognize novel patterns and shifting criteria, promoting the development of adaptive cognitive frameworks. By subjecting participants to unexpected changes in the task's requirements, researchers can delve into the cognitive flexibility and the capacity to swiftly transition between cognitive orientations [21]. As our understanding of these abilities grows, we gain invaluable insights into the intricacies of cognitive function and the potential avenues for enhancing adaptability in various contexts.

#### *3.1. Cognitive orientation switching abilities in Broca's syndrome*

Broca's syndrome, characterized by impairments in expressive language abilities, has been associated with difficulties in cognitive flexibility and task switching. The deficits observed in this population often extend beyond language processing and affect various cognitive domains. Studies utilizing the WCST have shown that individuals with Broca's syndrome exhibit impaired cognitive orientation switching abilities [23]. These individuals struggle with changing their cognitive strategies. The impaired cognitive orientation switching abilities in Broca's syndrome are thought to be related to the underlying neural dysfunction in the left frontal areas, including Broca's area. These brain regions play a crucial role.

Furthermore, the deficits in cognitive orientation switching can have implications beyond the WCST task itself. Difficulties in adapting to changing rules or criteria may manifest in real-life situations requiring cognitive flexibility, such as problem-solving, planning, and decision-making. Individuals with Broca's syndrome may struggle with adjusting their thinking and behavior in response to new circumstances, leading to challenges in various aspects of daily life [24].

It is important to note that the severity of cognitive orientation switching deficits may vary among individuals with Broca's syndrome. Future research is needed to further explore the specific mechanisms underlying cognitive orientation switching abilities in Broca's syndrome.

### *3.2. Cognitive orientation switching abilities in Parkinson's disease*

Parkinson's disease (PD) is associated with a range of cognitive deficits, including impaired cognitive orientation switching abilities [25]. While PD is primarily known for its motor symptoms, non-motor symptoms such as cognitive dysfunction have garnered increasing attention. Cognitive orientation switching abilities play a pivotal role in the efficient navigation of dynamic cognitive tasks.

The Wisconsin Card Sorting Test (WCST) has been previously used to assess the cognitive orientation switching abilities of individuals with Parkinson's disease [26, 27]. However, it has been found that this test is not well-suited for PD patients, as many of them struggle to grasp the rules of the game. As a result, another game called Odd-Man-Out (OMO) was invented.

In the OMO test, PD patients were able to understand and learn the initial classification rule but performed poorly in subsequent trials when the criteria were changed. Compared to normal controls, they demonstrated difficulties maintaining the cognitive set and were particularly challenged by distractions, indicating a weakness in switching between different thinking modes.

There are also some other experiments discovering this kind of ability indirectly. Proctor et al. [28] associated mistakes in perception during the Aubert test, where a rod is aligned to the visual vertical while the body is tilted with the inability of Parkinson's patients to anticipate and adjust their sensory systems for body tilt, which results in a deficiency of their "motor-sensory configuration". Likewise Bowen [29] argued that the shortcomings observed in Parkinson's patients during the Weinstein body-scheme test, which assesses spatial orientation, stem from their incapacity to alter their perceptual state in a way that allows them to interpret the "body map" accurately.

Experiments like these imply that they are experiencing an overall decline in their ability to manage their mental orientation in both perception and physical action functions. These effects would not directly impede perception or movement. However, they could significantly contribute to the clumsiness or inappropriate actions when dealing with tasks demanding intricate coordination between perception and movement. For instance, this could apply to tasks like operating machinery or driving, where the need to adapt to a constantly changing environment is crucial.

## **4. Relationships between cognitive orientation switching abilities and language comprehension**

As the Wisconsin Card Sorting Test is a task that does not involve verbal challenges, it is ideal for testing the relationships between cognitive switching abilities and language abilities. In Baldo and his colleagues' experiments, the performance of the subjects on the WCST shows a correlation with their several language abilities, especially comprehension and naming. Numerous individuals who have experienced brain injury, particularly those with frontal lobe damage, can successfully organize the initial category in the WCST without any challenges. However, they encounter difficulties when it comes to transitioning to a new category [30]. These results imply that language plays a role, to some extent, in flexibility and cognitive switching.

Impaired switching abilities may influence language comprehension by disturbing the switch of syntactic rules. When dealing with relational clauses embedded sentences, the sequence of syntactic operations will be interrupted and the syntactic decoding process will be reset. This local operation of the basal ganglia is orientation switching [21]. Basal ganglia disconnect or connect different pattern generators with cortical target sites through inhibitory and excitatory pathways to comprehend different syntactic meanings [31]. When the switching abilities of the basal ganglia are impaired, the ability to switch between different syntactic rules and maintain the appropriate sequence of operations becomes challenging. As a result, individuals may struggle to comprehend complex sentence structures that require flexibility in processing and integrating syntactic information. This disruption in cognitive switching can thus have a detrimental effect on language comprehension.

## 5. Conclusion

Broca's syndrome and Parkinson's disease have profound effects on sentence comprehension and the cognitive orientation switching abilities. Both disorders, traditionally known for their impact on speech production and motor functions, respectively, have been demonstrated to significantly disrupt language comprehension and cognitive flexibility. Individuals with Broca's syndrome and Parkinson's disease experience deficits in sentence comprehension, particularly in syntactic algorithmic processes, while still demonstrating certain levels of comprehension. They also exhibit challenges in cognitive orientation switching. These deficits can significantly impact their language abilities and overall cognitive flexibility.

The relationship between cognitive orientation switching abilities and language comprehension is complex. Studies have shown that impaired switching abilities can disrupt the syntactic decoding process, leading to difficulties in comprehending complex sentence structures. Furthermore, language abilities, such as comprehension and naming, have been found to correlate with performance on cognitive switching tasks. This suggests that language plays a role in cognitive flexibility and orientation switching.

To address the sentence comprehension deficits and cognitive orientation switching impairments in individuals with Broca's syndrome and Parkinson's disease, it is crucial to develop effective therapeutic strategies and interventions. Potential approaches include language therapy focusing on syntactic processing and comprehension strategies, cognitive training programs targeting cognitive flexibility and orientation switching, and the use of assistive technologies to support language comprehension and cognitive adaptation.

Further research is needed to deepen our understanding of the underlying mechanisms and specific interventions that can effectively improve sentence comprehension and cognitive orientation switching abilities in these disorders. By advancing our knowledge in this area, we can contribute to the development of targeted interventions and enhance the overall quality of life for individuals living with Broca's syndrome, Parkinson's disease, and other language-related disorders.

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