OBJECTIVES: To assess whether production of communicative gestures can be ameliorated by therapy, to explore factors that might influence individual variability of therapeutic success and to find out whether therapy effects generalize to unpractised gestures. SETTING: Hospital department specializing in rehabilitation of patients with neuropsychological disorders. SUBJECTS: Twenty-three consecutive severely aphasic patients received therapy; ten were tested repeatedly without interpolated therapy. DESIGN: Twenty-four communicative gestures were divided into three sets of eight gestures. In the therapy group one set was practised during each of three consecutive periods and after that period changes in proficiency were assessed for all three sets. Comparisons were made between changes of practised and unpractised gestures during each therapy period within the therapy group, and between changes of unpractised gestures in the therapy group, and the changes brought forward by repeated testing in the control group. INTERVENTIONS: Therapy was centred on familiarizing patients with the communicative functions of gestures and on improving the spatial precision of their gestures. MAIN MEASURE: Scoring of gestures considered their accuracy and the necessity of assistance. RESULTS: Therapy led to substantial improvement of practised gestures. There was also improvement of unpractised gestures which was
significantly smaller than that of practised gestures but greater than the improvement induced by repeated testing in the control group. CONCLUSIONS: In view of the limited generalization, gesture therapy should concentrate on gestures that are relevant for communication in daily living of the individual patients.