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3 **What do we know about Foreign Accent Syndrome? – Letter to**  
4 **the Editor**

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10 Foreign accent syndrome (FAS) is a speech disorder with sudden changes in  
11 speech patterns resulting in affected people perceived to have a new non-native  
12 accent. Characteristic changes in language concluded in interviews provide  
13 some initial insight into the syndrome.<sup>1</sup> The control group (without disorders)  
14 had normal speech and grammar, patients with language-speech disorders faced  
15 difficulty in speaking whereas FAS patients were labelled ‘foreign’ due to  
16 frequent hesitation, slow speech, inappropriate grammar and word selection.<sup>1</sup> A  
17 great deal of time has been dedicated to understanding FAS, however, a varied  
18 patient presentation and underlying pathophysiology has led to difficulties in  
19 diagnosing the disorder and evaluating its true epidemiology.

20 Around 100 cases have been confirmed since the first clinical picture of FAS  
21 presented by Pierre Marie et al (1907). The most common neurogenic variant is  
22 predominantly associated with trauma or stroke-related lesions of the frontal  
23 cortex including Broca’s area. However, ischaemic lesions in the posterior fossa  
24 of brain have also been associated with the onset of FAS.<sup>2</sup> This unusual  
25 phenomenon was explained by associating these lesions with cerebral  
26 hypoperfusion following disruption of cerebellar-cerebral connections.<sup>2</sup>

27 In the testimony by a disabled person Jasvinder,<sup>3</sup> he mentions how he developed  
28 FAS following aphasia post-cerebral haemorrhage. With no speech therapy in

29 his native language Punjabi but in English, he spoke Punjabi hesitantly and in a  
30 British accent; perceived foreign by his native Punjabi-speaking relatives.  
31 Furthermore, occasional encounters solely with Pakistani Punjabis who spoke a  
32 different version of the language were non-significant and did not hold up the  
33 development of FAS.<sup>3</sup> Besides trauma or stroke-afflicted acquired subtype,  
34 neurogenic FAS is rarely described in the context of developmental speech  
35 disorder as well.<sup>4</sup> Up till now, only three cases have reportedly developed FAS  
36 solely due to the underdevelopment of visuospatial skills and memory and in the  
37 absence of any signs of trauma or neuropsychological symptoms.<sup>4</sup>  
38 In addition, a psychogenic variant has also been supported in a study which  
39 presents the case of a French-speaking Belgian lady who developed FAS and  
40 adopted a Dutch accent two years following a car accident.<sup>5</sup> She had normal  
41 results on brain imaging however, neuropsychological tests were conclusive of  
42 borderline personality disorder. It is rather interesting to note that underlying  
43 psychiatric factors and not trauma, predisposed this patient to FAS. She also  
44 developed an indifferent attitude towards her condition indicating that contrary  
45 to neurogenic subtype, psychogenic FAS patients are emotionally satisfied with  
46 the impression of getting a new accent.<sup>5</sup>  
47 Despite worldwide prevalence, it is unusual that FAS has not been diagnosed in  
48 Pakistan. This could be attributed to the little awareness as only a few cases  
49 have been reported by Pakistani newspapers diagnosed elsewhere. To our  
50 knowledge, this is the first article from Pakistan summarizing the current  
51 knowledge about FAS and highlighting the need to keep an eye out for such  
52 cases as timely diagnosis and therapy can potentially treat or even reverse the  
53 condition, which would otherwise become permanent and affect the quality of  
54 one's life. Furthermore, in the light of limited overall understanding of the  
55 disorder, there is a notable need for further research to identify the effects of  
56 this syndrome, both at the personal and inter-personal levels to allow for full  
57 rehabilitation of affectee's speech profile and psychological well-being.

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