

ABSTRACT

The present study aimed at investigating the psychometric properties and clinical utility of a modified version of Boston Naming Test for use in Cantonese-speaking individuals in Hong Kong. The test consisted of 30 items and included a recognition task that replaced the original phonemic cueing procedure. It was administered to 77 normal adults and 52 patients with brain damage. Results indicated that spontaneous naming in the sample of normal adults aged 23 to 79 was positively associated with educational level. No effects of age and gender were found. Recognition errors, both semantic and perceptual, were considerably infrequent in the present sample of normal and brain-damaged individuals. Based on the rates of correct responses, items were rearranged in ascending order of difficulty. The test was found to have satisfactory internal consistency and discriminant validity. It differentiated normal individuals from brain-damaged patients with naming deficits. A cutoff score of 24 for spontaneous naming was suggested as an indication for further evaluation of brain damage. Contrary to some Western studies, naming performance did not differ among the present sample of bilateral, left and right brain-damaged patients. The Cantonese version of Boston Naming Test was useful as a screening instrument for detecting naming deficits in brain-damaged patients, but its use in lesion localization was limited. Further investigations of the effects of lesion laterality on naming in Chinese-speaking populations was recommended, by using neuroimaging techniques to examine the underlying neurocognitive networks involved in naming in the Chinese language.