

Voice and Speech in Parkinson's



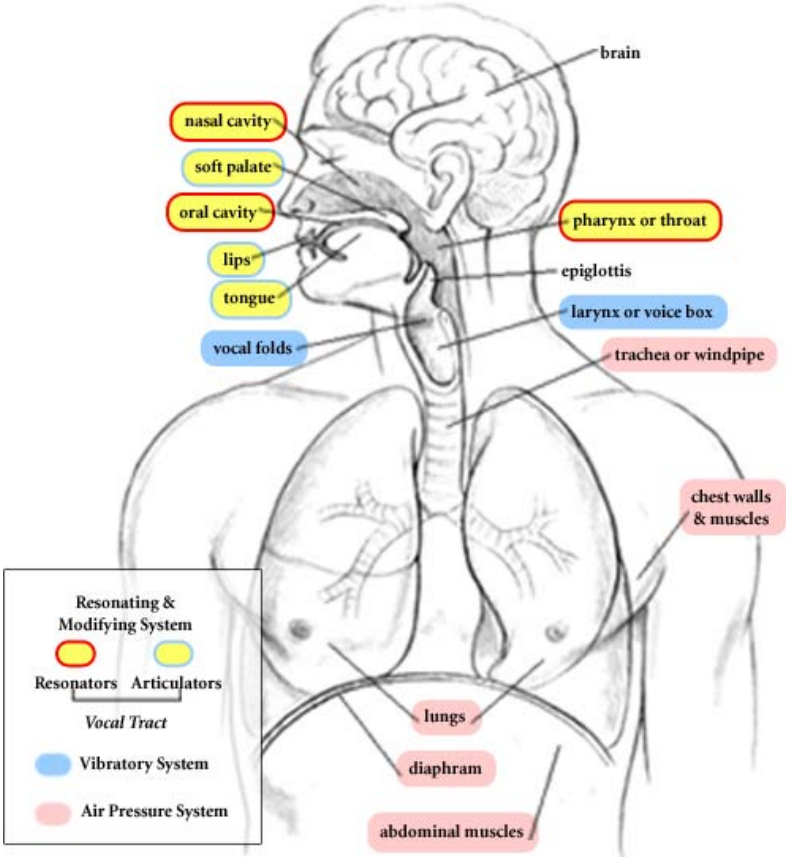
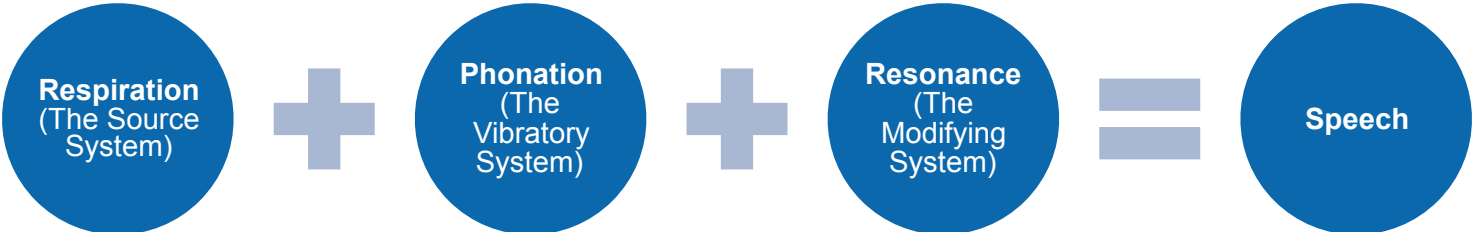
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Common speech symptoms

- Quiet volume
- Monotone
- Less facial expression
- Imprecise articulation
- Stuttering
- Examples:



Speech Production is Dependent on Three Systems



Causes of Change

- Centrally mitigated
- It's the whole system, not just speech
- Unique to Parkinson's is often poor insight to these motor changes
- Inability to perceive reduced movement fuels further deterioration
- Eventual awareness may paradoxically lead to less socialization
- The less you use your voice, the worse it will get
- This is true whether you have Parkinson's or normal aging effects

Intervene Early

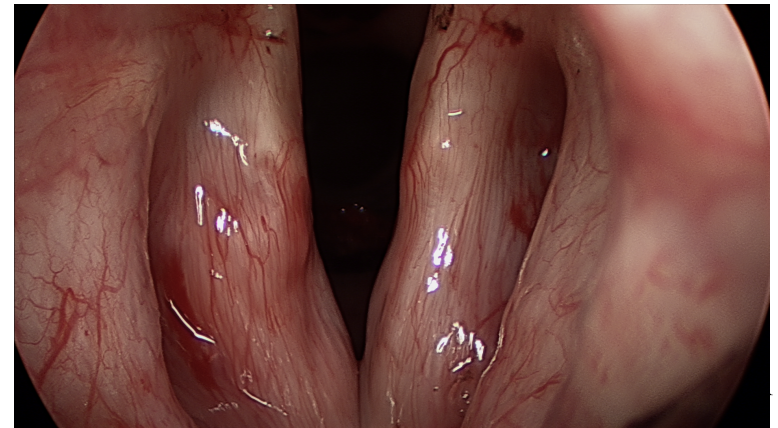
- There is evidence to support neuroprotection
- It heightens your awareness of numerous voice and speech parameters
 - Volume
 - Articulation
 - Pitch inflection
 - Facial expression
 - Speaking rate
- Your family will also be alerted to more specific communication elements
- You will be more successful for future therapy iterations

What does therapy involve?

- Lee Silverman Voice Treatment LOUD (LSVT LOUD)
- SPEAK OUT! and LOUD Crowd
- Here are typical exercises of LSVT LOUD:
 1. "Ahhh" as LOUD as you can for as LONG as you can
 2. "Ahhh" from your LOWEST to HIGHEST pitch
 3. "Ahhh" from your HIGHEST to LOWEST pitch
 4. 10 Functional phrases from your daily life
 5. Phrases, Sentences, Paragraphs, Extemporaneous
 6. Daily measure of "Off the cuff" volume

Look at the larynx

- Prior to initiating treatment, we need to inspect the structure and function of your vocal cords.
- What are we looking for?
 - Mobility, symmetry, muscle tone, smooth mucosa, irregularity that would preclude participation in a program requiring forceful vocal cord collision
- If your vocal cords are significantly atrophied and you do not respond robustly to diagnostic voice therapy, you may benefit from a vocal cord injection to bring them closer together.



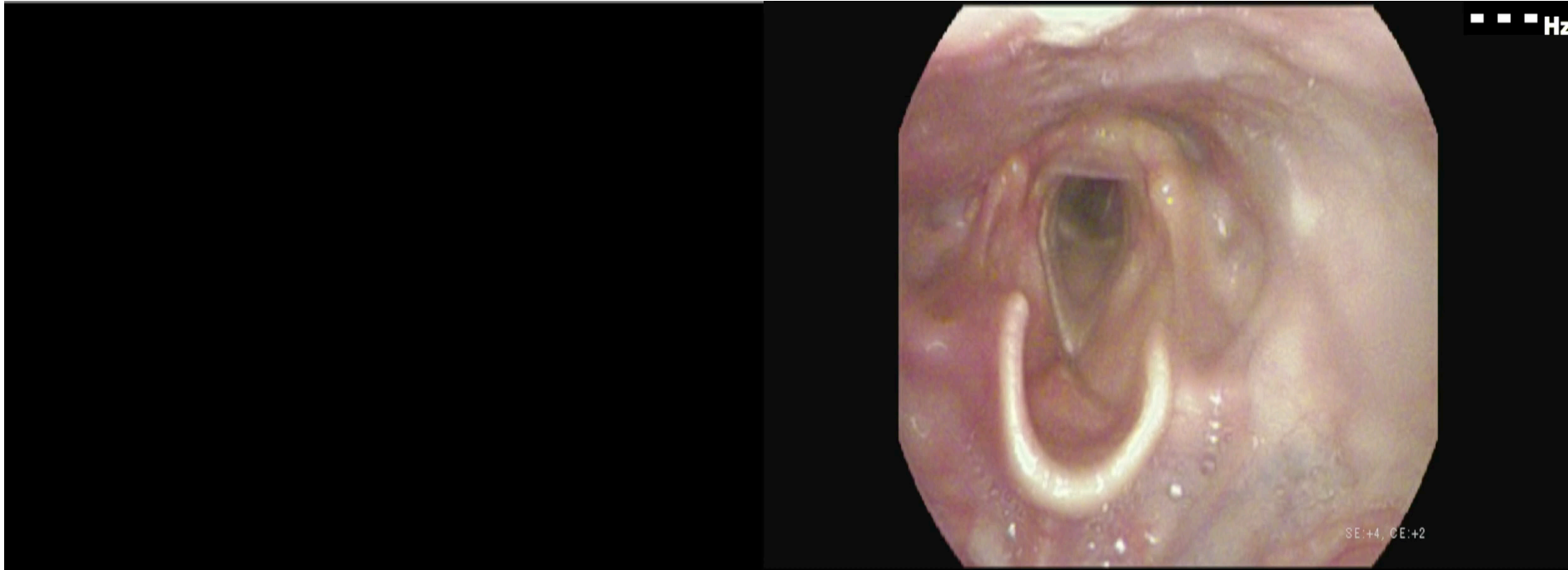
Maintenance

- Voice Club
- Social groups
- Volunteering
- Phone/Skype dates with family and friends
- Revisit home program; 6-12 month check-ins with therapist
- Repeat vocal cord augmentation
- Tremble Clefs
- Rock Steady
- Community Choirs
- Find as many opportunities as possible to use your voice!

Swallowing

- Commonly co-occurring with voice change is swallowing difficulty
- The slowness and weakness of your throat muscles may lead to this
- Signs of dysphagia
 - Coughing during and after meals
 - Recurrent bronchitis or pneumonia
 - Weight loss
 - Foods sticking in the mouth or throat
 - Inability to swallow pills or solids

What does dysphagia look like?



Therapy Access

- Ask your neurologist for a speech pathology referral
- Seek a clinician with expertise in neurological disorders
- Ask about competence in LSVT LOUD
- Ask about access to endoscopic or fluoroscopic swallowing assessments
- Consider seeking care at a multidisciplinary voice and swallowing center to see the therapist and laryngologist simultaneously

Thank you