

# INTRODUCTION

Speech-language pathologists face many challenges when working with patients who present with a dysarthria.

- There is no such thing as a dysarthria. There are many different subtypes of dysarthria.
- Some dysarthrias are caused by an acute event and respond fairly well to treatment, whereas other dysarthrias are related to degenerative diseases and require an entirely different type of intervention.
- We still lack a significant number of efficacy studies to prove that how we treat this clinical population is effective.
- There are techniques that may help the patient with dysarthria compensate for decreased intelligibility, but it is very difficult to get the patient to use the techniques on a consistent basis.

Dysarthria is often accompanied by cognitive-communicative deficits that make it difficult for the patient to fully participate in treatment. If you were in graduate school long ago (with me!), you likely studied Darley, Aronson, and Brown's text (*Motor Speech Disorders*, 1975), with its classification system of different dysarthrias. If you're newer to the field, you found similar perceptually-based descriptions in newer texts by Duffy (2005) and McNeil (2009). Those are excellent texts if you're searching for more detailed information. It is a challenge to develop skill in differentiating among the types of dysarthria; however, this is an important skill since the treatment varies in relation to the type of dysarthria and its etiology. The charts in this book will help you with differential diagnosis and treatment planning.

*The Source for Dysarthria* was first published in 1997 as a tool to help you improve the services you provide to patients with dysarthria. After 13 years, it was time for a comprehensive review and update of the book. Like the original edition, *The Source for Dysarthria Second Edition* provides a refresher on the neurology of dysarthria as well as tips and techniques for assessing dysarthria and planning treatment. It is based on a perceptual framework, meaning it is based on refining our listening skills and helping us make decisions about diagnosis and treatment as a result of what we hear rather than on the results of an instrumental assessment (since most of us don't have access to instrumentation when working with patients). The book will also help you relate perceptual symptoms to specific physiologic causes.

*The Source for Dysarthria Second Edition* includes evidence that has emerged since 1997. In particular, we know a lot more about what oral-motor exercises do or don't do for improved speech intelligibility. The ambiguity of that research is reflected in this edition. I also expanded the information on instrumentation since it has improved and is more readily available. Because of the continued pressure from payers for cost-effective results, with a focus on function, I also added a chapter on Intelligibility, Comprehensibility, Efficiency, and Environment to help you put it all together. Finally, although the physiology, evaluation strategies, and treatment techniques apply to adults and children, I've also added a new chapter on pediatric dysarthria with evidence to support that clinical population.

I hope you find this book useful in two ways. When you encounter an interesting and challenging client, please take *The Source for Dysarthria Second Edition* from your shelf and look through the chapters on neurology, evaluation, and treatment planning to help you make decisions about the patient's care. Second, since there are many activities on the enclosed CD for you to use with patients, I hope you will print these pages and take them into your therapy sessions on a regular basis. They include goals and treatment objectives, descriptions of activities to achieve those treatment objectives, and patient education handouts. New to this edition are activities for comprehensibility and efficiency, which are also included on the CD.

It takes great skill on the part of a speech-language pathologist to accurately evaluate a patient with dysarthria, make an appropriate diagnosis, plan the kind of intervention needed, establish a prognosis, and choose treatment objectives and activities that will help the patient achieve the goals you have set. I hope *The Source for Dysarthria Second Edition* will help you refine your skills in each of those areas.

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