

Chatterboks Speech Therapy, P.C.

“What is that?”

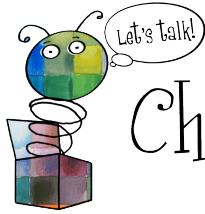
This information may be useful for learning some of the terminology related to what a speech-language pathologist can treat – plus links to useful websites.

- **Autism Spectrum Disorder (ASD)**

- Common related terms/diagnoses: Asperger's Syndrome, PDD-NOS (Pervasive Developmental Delay/Disorder – Not Otherwise Specified)
- Autism Spectrum Disorders – Autism is a developmental disorder in children that is characterized by impairments in communication, social interaction, and relating to the world surrounding them. As the name suggests, Autism is a spectrum and how it affects an individual varies greatly (<http://www.asha.org/public/speech/disorders/Autism/>)
- Please visit www.autismtreatmentcenter.org
- Please visit www.autismspeaks.org

- **Childhood Apraxia of Speech (or just Apraxia)**

- Apraxia- A speech sound disorder in which an individual's speech lacks precision and coordination. (<http://www.apraxia-kids.org/site/apps/nlnet/content.aspx?c=chKMIOPllsE&b=839037&ct=837215>)
- Oral Motor Therapy – Oral motor therapy refers to a group of exercises targeting the muscles used for speech production. As a whole, research does not support the use of only oral motor therapy to treat articulation and/or motor speech disorders. Combined therapeutic activities, that include coordination work with repetition related to speech sounds, do have support with research findings. Please ask your therapist if you are interested in specific information.
- Articulation/Phonological Disorder
- Articulation- refers to errors in sound production. Sounds may be substituted, deleted, added, or changed. Example: substituting /w/ for /r/---“wed, wat, wead” red, rat, read
- Phonological- refers to patterns of sound errors. Example: simplifying consonant blends at the beginning of words---skunk becomes “kunk,” spoon becomes “poon” (<http://www.asha.org/public/speech/disorders/SpeechSoundDisorders/>)



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- **Language Disorder**

There are two areas of language: receptive and expressive.

- Receptive language: the ability to understand the ideas, feelings, and meanings of what others say.
- Expressive language: the ability to share and explain our thoughts and feelings with others. One can have a receptive language disorder, an expressive language disorder, or both.
(http://www.asha.org/public/speech/development/language_speech.htm)

- **Developmental Delay**

Developmental delay is a term used by some doctors and insurance companies as an umbrella term for a child when they are not developing specific skills within a normal period of time. It is also a category of diagnosis codes used by many speech-language pathologists to describe the nature of your child's difficulties. It will always be labeled more specifically than just a delay, more so as a disorder, if your child's test performance is below the average range for a child their age.

- **Hearing Loss**

Cochlear implants are electronic devices that are implanted into the inner ear that stimulate the auditory nerve, which allows the person who was previously considered deaf, to hear. This hearing is artificial but very functional. (<http://www.nidcd.nih.gov/health/hearing/pages/coch.aspx>)

- **Voice Disorder**

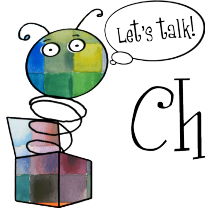
A voice disorder refers to how one's voice sounds. When the voice is abnormal or absent, then it is termed a voice disorder. Abnormalities can be heard in the quality of the voice, pitch, volume, or amount of time one can sustain a sound. (<http://www.asha.org/docs/html/RP1993-00208.html>)

- Vocal Nodules: This is a common voice disorder that is often caused by vocal abuse (excessive yelling and screaming are common causes). Over time a bump will form on the vocal cord that with time grows and hardens. The result is a rough or scratchy voice. Nodules can be painful or leave the individual with a feeling of a lump in their throat.
(<http://www.asha.org/public/speech/disorders/NodulesPolyps/#one>)

- **Stuttering**

Stuttering typically begins in childhood and is characterized by repetitions (b-b-b-b-bed), stops (appears stuck on the sound and then says it: -----bed), or prolongations (sssssnake) of sounds, syllables, or words. We often refer to this as "bumpy" speech. Everyone has bumpy speech from time to time, but someone who stutters has bumpy speech that consistently interferes with their ability to communicate their message. Stuttering often becomes more intense with increased stress.

(<http://www.asha.org/public/speech/disorders/stuttering.htm#one>)

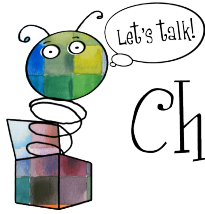


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- **Cleft Lip/Palate**

A cleft refers to an opening. An individual can have a cleft, an opening, in the lip, roof of the mouth, or both. There are various speech sound errors that can accompany a cleft of any kind.

<http://www.asha.org/public/speech/disorders/CleftLip/>



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- **Velopharyngeal insufficiency (VPI)**

All speech sounds are produced by directing sounds through the mouth, with the exception of /m/, /n/, and /ng/. Someone with velopharyngeal insufficiency has difficulty regulating the flow of air between the nose and mouth during speech, which often results in speech that is very difficult to understand. This is typically experienced by individuals who have a cleft palate, however there are many cases where the cause is unknown.

- **Augmentative and Alternative Communication (AAC)**

AAC refers to any method of communication other than oral speech. AAC encompasses a variety of methods including but not limited to: is writing, sign language, pictures, and other high tech devices. There are two categories that AAC commonly divided into:
low tech and high tech.

- Low Tech: low tech types of AAC refer to communication methods that do not require technology. This includes but is not limited to: pictures, writing, sign language, and gestures. Low tech methods are often used with young children to help them communicate while they develop intelligible speech.
- High Tech: These are dedicated technology devices that when a button is pressed, a word or message is produced. (<http://www.asha.org/public/speech/disorders/AAC/>)

A common misconception with AAC is that it is designed to replace all oral speech. AAC is meant to serve as a ways to communicate when verbal methods alone are not successful. For some individuals AAC may be their only method of communication, while others will combine speech with AAC methods. Research shows that using AAC does not cause individuals to lose their ability to verbally speak. In fact, it often increases an individual's verbal communication.