



Characteristic of speech pace disorders

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Speech pace -

is the speed of speech in time, its acceleration or deceleration, which determine the degree of articulation tension and auditory distinctness



Bradylalia (bradyphrasia) –

pathologically slow, but correctly coordinated speech.

The basis of the pathogenesis of bradylalia is a pathological intensification of the inhibitory process that dominates the excitation process

Speech symptomatology of bradylalia

- slowness of the pace of internal and external speech,
- slowness of writing and reading processes,
- monotony of voice,
- interverbal (pauses between word sounds) and intraverbal (pauses between words) moderation.

These symptoms are observed in various forms of independent speech: in dialogue, retelling from a picture and a series of pictures, retelling of a text, story on a given topic, reading.

Nonspeech symptomatology of bradylalia

- distortion of gross motor skills, fine motor skills of hands, fingers (slow movements, sluggish, insufficiently coordinated, incomplete in volume, motor awkwardness is observed);
- distortion of the facial muscles (amimic face);
- distortion of mental function (a slowdown in perception, attention, memory, thinking is observed; a tendency to stereotypes, perseverations, and orientation disorders is observed).



Tachilalia (tachyphrasia) –

pathologically accelerated pace of speech.

The basis of the pathogenesis of tachylia is the pathological predominance of excitation processes.

Speech symptomatology of tachilalia

- acceleration of the pace of internal and external speech (instead of 10-12 sounds in 1 second, 20-30 are pronounced),
- fast pace of reading and writing,
- stuttering, repeating, swallowing, rearranging of syllables, words,
- mutilation of sentences,
- vague pronunciation of phrases,
- agrammatisms.



Nonspeech symptomatology of tachilalia

- distortion of gross motor skills (fast and swift movements, hyperactivity, motor anxiety even during sleep),
- distortion of the autonomic nervous system (redness of the face, ears, the appearance of sweat on the face, cooling and sweating of hands),
- distortions in mental processes (attention is unstable, switchability from object to object is increased, insufficient amount of visual, auditory and motor memory, the flow of thought is faster than the ability to articulate it),
- distortions of the emotional-volitional sphere and behavior (increased emotionality, short temper, easily excitable).



Types of tachilalia

- **Battarism** – a pathologically caused acceleration of speech, in which words are pronounced indistinctly without finishing.
- **Poltern (stumbling)** – pathologically accelerated speech with the presence of discontinuity in the pace of speech of a non-convulsive nature.

Nonspeech symptomatology of battalism and poltern

- **gross motor skills disorder** (swiftness, scattered movements, brisk walking, sharp turns, random movements of the face (grimaces), arms and the whole body during speech);
- **attention disorder** (instability, do not know how to listen to others, poor auditory attention);
- **thinking disorder** (scattered, lack of logic);
- **emotional and volitional sphere disorder** (increased emotionality, contact, capable of self-affirmation).



The concept of cluttering

Cluttering is a communicative disorder that affects an individual's ability to express himself in a clear and / or concise manner (according to Y.O. Filatova).

The structure of speech and behavioral disorders in children with cluttering is based on the tempo-rhythmic disorganization of psychomotor activity due to impaired functioning of brain structures that determine and control the spatio-temporal characteristics of various functional systems: from motor to behavioral.

Speech symptomatology of cluttering

- speech disinhibition, verbalization of actions;
- accelerated and / or irregular pace of speech;
- lack of word endings;
- skipping or distorting of sounds or syllables;
- lack of pauses between words;
- many false starts and stops during speech;
- excessive use of inflexibility in oral utterances: embolic words such as “mmm”, “uh”, repetition of words, repetitions or revisions of phrases (unlike stuttering, these indices of inflexibility are not caused by the convulsive state of the muscles of the speech apparatus);
- distortion of the programming sequence of oral utterances;
- difficulties in slowing the pace of speech, even after focusing on it;
- difficulties of handwriting, the intelligibility of which in the process of writing is reduced;
- difficulties in typing words correctly, with which, for example, the need for additional editing of email messages is connected;
- speech more often improves in structured communication situations when a person actively manages it, for example, when shooting video; speech often worsens in spontaneous conversation when a person is relaxed.

Nonspeech symptomatology of cluttering

- swiftness of thoughts;
- difficulties in mental organization;
- words and thoughts are reproduced differently than planned;
- tendency to interrupt communication partner;
- lack of awareness of blurring articulation;
- difficulties in concentrating (holding) attention while reading and / or talking;
- memory impairment of different modality (motor, visual and auditory);
- features of behavior in the form of impulsivity, motor and speech disinhibition;
- obsessive sociability;
- lack of criticality regarding one's own speech and behavior;
- people with cluttering have reduced social adaptation.

Literature:

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