

SPEECH PRODUCTION AND PERCEPTION ANALYSES

AFTER TOTAL OR PARTIAL GLOSSECTOMY

CONTRIBUTION OF CINE- AND FUNCTIONAL MRI

ABSTRACT

Introduction This study aims at analyzing speech disorders after partial or total glossectomies. Severe modifications of the vocal tract induce speech intelligibility and vocalic and consonantal production impairments.

Materials and methods: patients who underwent oro-pharyngo-laryngeal surgery including glossectomy are selected. They are current patients at the ENT and Head & Neck Surgery Department of Strasbourg University Hospital. Examination of patients and control subjects during phonation are carried out using cervico-facial cine-MRI, video- and acoustic recordings⁵. The data for each patient are obtained at pre- and postoperative stages (approximately one week before surgery and 1, 6 and 12 months after surgery). Acoustical analyses focussed on the first three formant frequencies for vowels /i, a, u/, and on the burst spectrum and Klatt's VOT for plosive consonants /t, d, k, g/ appearing in VCV sequences (V=a). Speech intelligibility during spontaneous conversation is evaluated by an expert jury. Data are compared to the data i) of healthy subjects, ii) between pre- and postoperative periods to analyze compensation mechanisms in order to optimize speech therapy strategies^{1,3}.

Preliminary results: in a complex surgery case of total glossectomy, very early rehabilitation based on articulatory motor targets and initiated before recovery of phonation significantly improved segmental and suprasegmental speech components³. Elocution has not shown major deterioration of pitch and speech rate². 5 months after surgical treatment and speech rehabilitation, Klatt's VOT duration values became similar to the Klatt's VOT duration values of control speakers. Timing constraints of consonant productions were perturbed and affected the glottal signal and articulatory coordination: voicing pulses of voiced plosives disappeared. Progressively, F1 and F2 values of /i, a, u/ varied and the acoustic vowel space augmented. F3, with lower values at the first postoperative recording, tended gradually to resemble "standard" values.

Conclusion: these results justify research including i) perceptual measurements, ii) acoustic analyses, iii) cine-MRI, in order to study and correlate data in the case of glossectomy. The combination between functional brain MRI and effects of surgical^{1,4,6} and rehabilitative treatments could open new therapeutic perspectives.

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Key words : Vocal Tract Surgery - Speech Therapy Program - Precociousness - Articulatory Motor Targets - Speech Intelligibility - Acoustic Analyses - MRI.

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