

Speech Language Pathology & Parkinson Disease

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Thank You Parkinson Society BC!



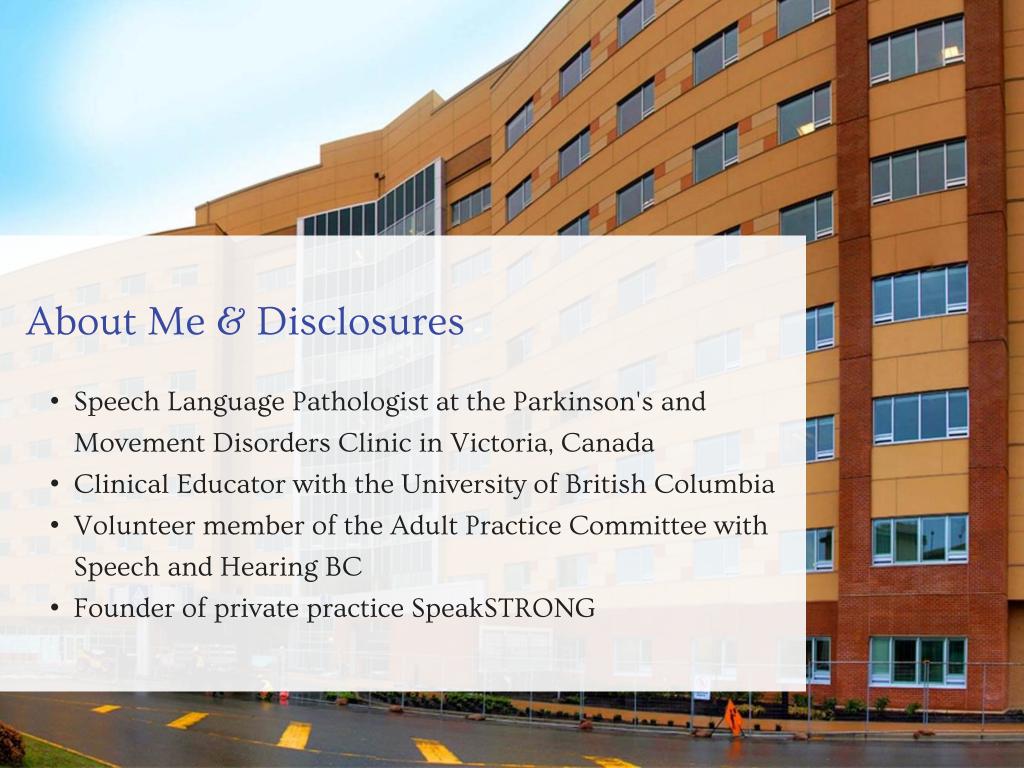
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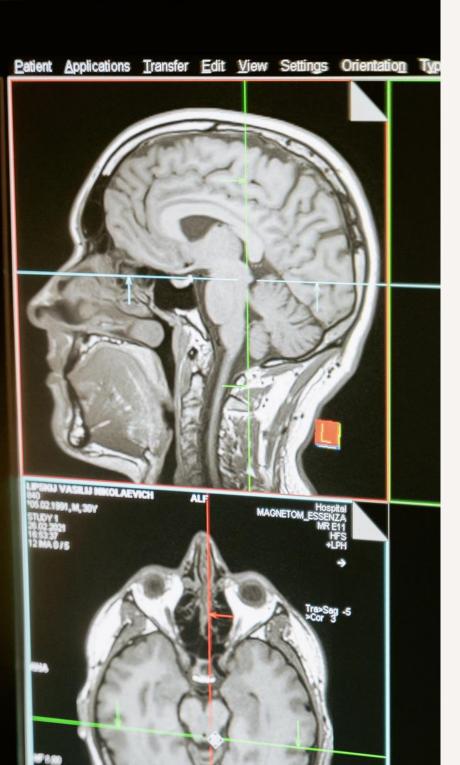






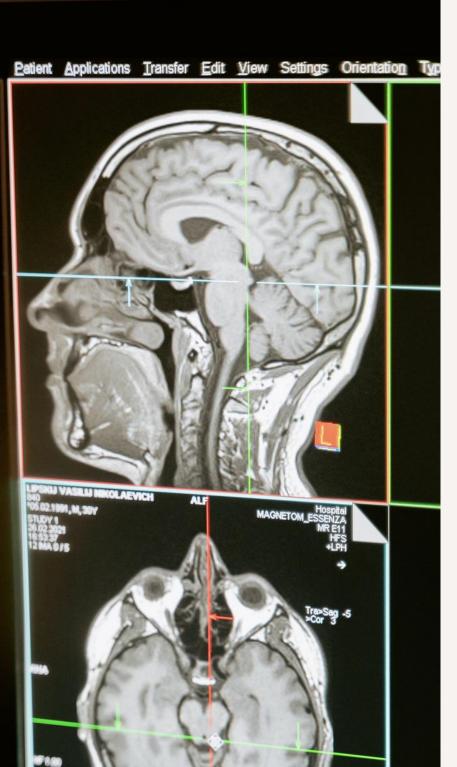
Today's Agenda

- Welcome
- Introduction to SLP
- SLP and Parkinson Disease (PD)
- SLP Assessment and Treatment Options
- Seeking Support
- Questions



What is SLP?

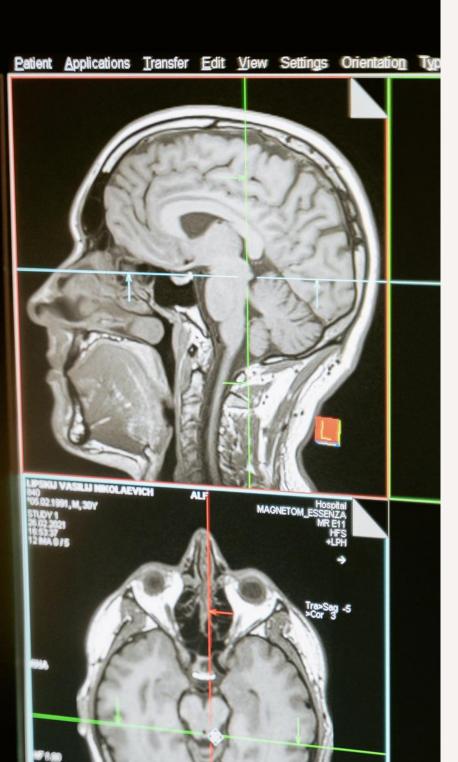
Speech Language Pathology



What is SLP?

"Speech Language Pathologists are health professionals who identify, diagnose, and treat communication and swallowing disorders across the lifespan"

Speech Language and Audiology Canada (SAC), 2016



What is SLP?

- Master's degree or equivalent
- Work with multiple populations
 - Pediatric and schools
 - Schools
 - Hospitals
 - Rehabilitation
 - Corporate
 - Technology
 - And more!

- Speech and Voice
- Cognitive Communication
- Chewing and Swallowing
- Managing Saliva

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Articulation
Voice quality & volume
Expression

- Speech and Voice
- Cognitive Communication
- Chewing and Swallowing
- Managing Saliva



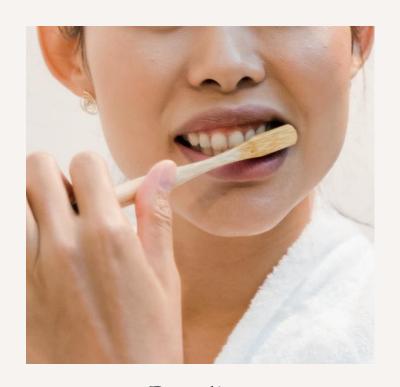
Memory & Attention
Language Comprehension
Language Expression

- Speech and Voice
- Cognitive Communication
- Chewing and Swallowing
- Managing Saliva



Comfort Efficiency Safety

- Speech and Voice
- Cognitive Communication
- Chewing and Swallowing
- Managing Saliva



Drooling
Dry Mouth
Phlegm



AN

ESSAY

ON THE

SHAKING PALSY.

CHAPTER I.

DEFINITION-HISTORY-ILLUSTRATIVE CASES.

SHAKING PALSY. (Paralysis Agitans.)

"his words are now scarcely intelligible; and he is...

no longer able to feed himself..."

(James Parkinson, 1817)

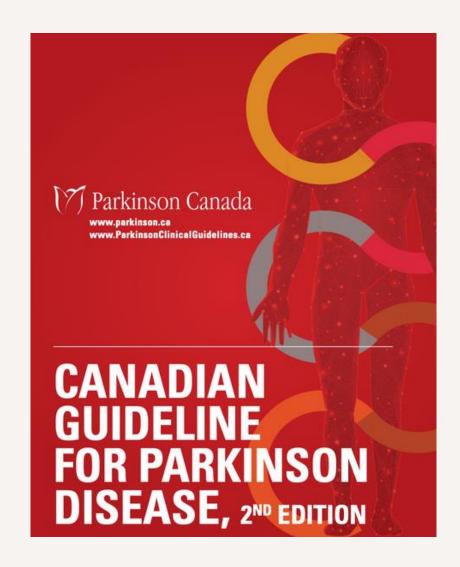
Estimates suggest that up to 90% of people with Parkinson disease will experience changes to their speech, swallowing, and/or saliva over the course of their disease.

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SLPs can assess and treat these symptoms to improve function and/or slow deterioration.

"Speech and language therapy is essential to the quality of life of patients with Parkinson disease"

(p. 26)



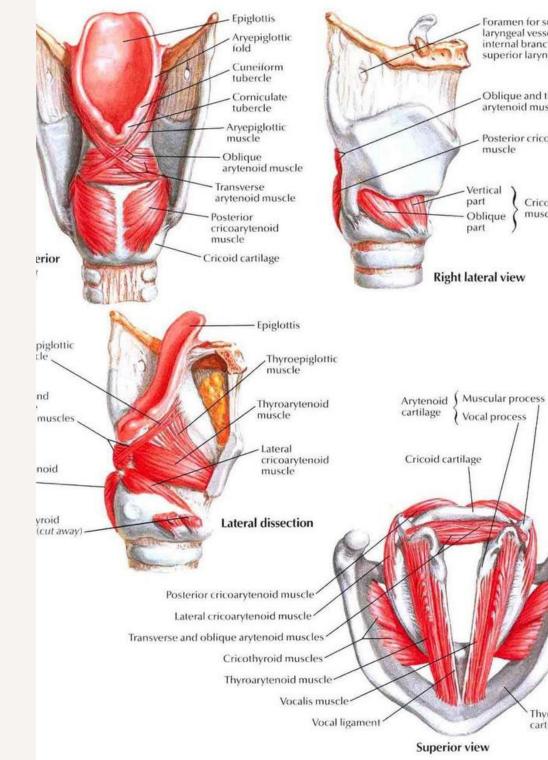
Why?

What causes these symptoms and changes in PD?



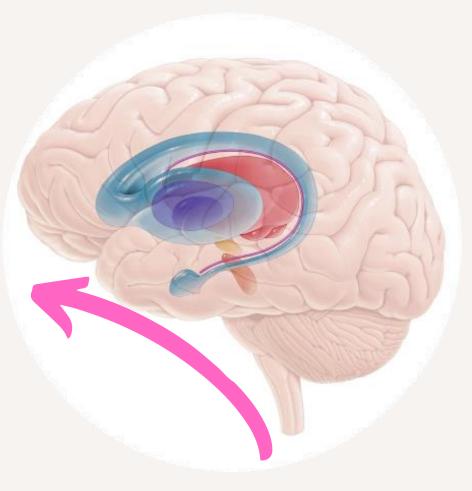
Why?

- Speaking, swallowing, and managing saliva are complex motor tasks
- Involving over 40 muscle pairs and most cranial nerves
- Their control and coordination relies on brain centres impacted by PD



Neurological & Physical Changes

- Progressive changes to the brainstem, basal ganglia, and cortical areas in PD change our use and control of swallowing and speech anatomy
- Underuse of structures, reduced insight, and various non-motor symptoms may exacerbate changes



What does SLP Intervention Look Like?

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Dependent on

- Goals
- Needs
- Resources

What does SLP Intervention Look Like?

Dependent on

- Goals
- Needs
- Resources

- Education
- Assessment
- Strategies
- Treatment
- Groups
- Follow Up
- Referrals
- In Person
- Virtual



Speech

Articulation of the face
Voice in the throat
Breathing of the lungs

Language

Understanding others

Expressing self

Word finding

Cognition

Memory

Attention

Problem solving



Speech and Voice Changes





Do you notice? Requests to repeat yourself Difficulty speaking on phone Difficulty in group settings Speaking less Not liking the sound of your voice

Voice Changes in PD

HYPOKINETIC DYSARTHRIA

Hypo = too little

Kinetic = movement

Dys = difficult or impaired

Arthr = articulation

-ia = suffix

Dysarthria type can also be a component of differential diagnosis

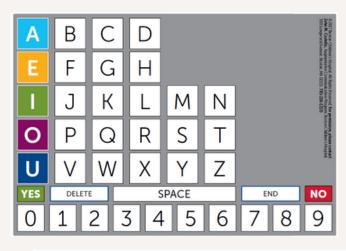


https://www.youtube.com/watch?v=gNIdxYjGVV8



LSTLOUD®









First: Ask whether my needs are to do with CARE/COMFORT, ACTIVITIES, or PEOPLE.

Description of PEOPLE.

Description of Next: Scan through the selected list, pointing to the numbers, and watch for a YES or NO from me.

CARE / COMFORT	ACTIVITIES – I would like to	PEOPLE
1 Pain	32 Phone/video call	63 Edna
2 Uncomfortable	33 Go somewhere	64 Sam
3 Bathroom	34	65
4 Hungry/thirsty	35	66
5 Trouble breathing	36	67
6 Too hot/cold	37	68
7	38	69
8	39	70
9	40	71
10	41	72
11	42	73
12	43	74
13	44	75
		76
	e	77 Someone else
		78 Next page







FREE Communication Wallet Cards on the website

www.speakstrong.ca





Speech and Voice Changes

Intervention

- Effective and efficient communication
- Social fulfillment
- Safety

Treatment examples

• Strategies, therapy, alternative and augmentative options



What can I start doing right now?

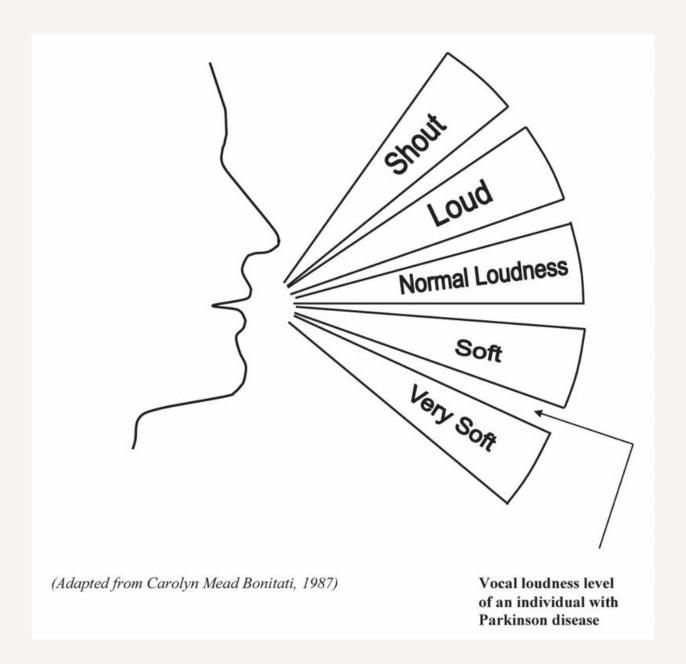
Keep talking!

Consider the environment

Consider your audience

Exaggerate

Back-up communication method







Swallowing Changes

Difficulty bringing food to mouth

Difficulty chewing

Difficulty keeping food in mouth

Difficulty starting the swallow

Food or liquid feeling stuck

Coughing or choking

Difficulty swallowing pills

Sensation of food coming back up

Nasal regurgitation

Wet or gurgly voice

Increased effort, fatigue, running out of breath during meals

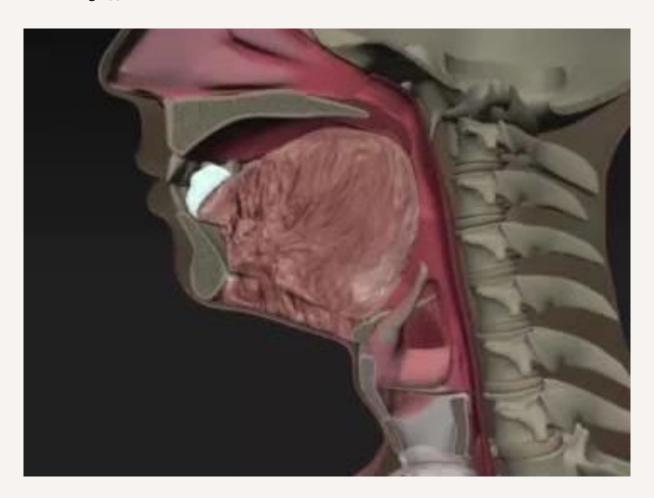
Taking longer to eat

Unexplained weight loss

Recurrent pneumonia

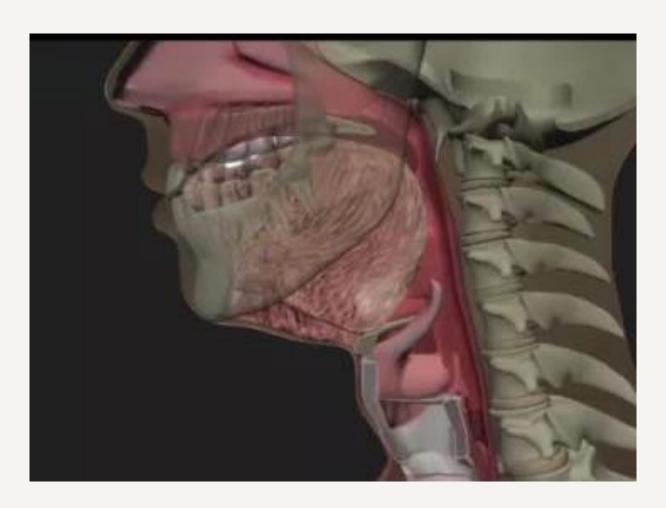
Swallow Physiology

Typical Swallow - Illustration



Swallow Physiology

Abnormal Swallow - Illustration



Swallow Physiology

Real Examples



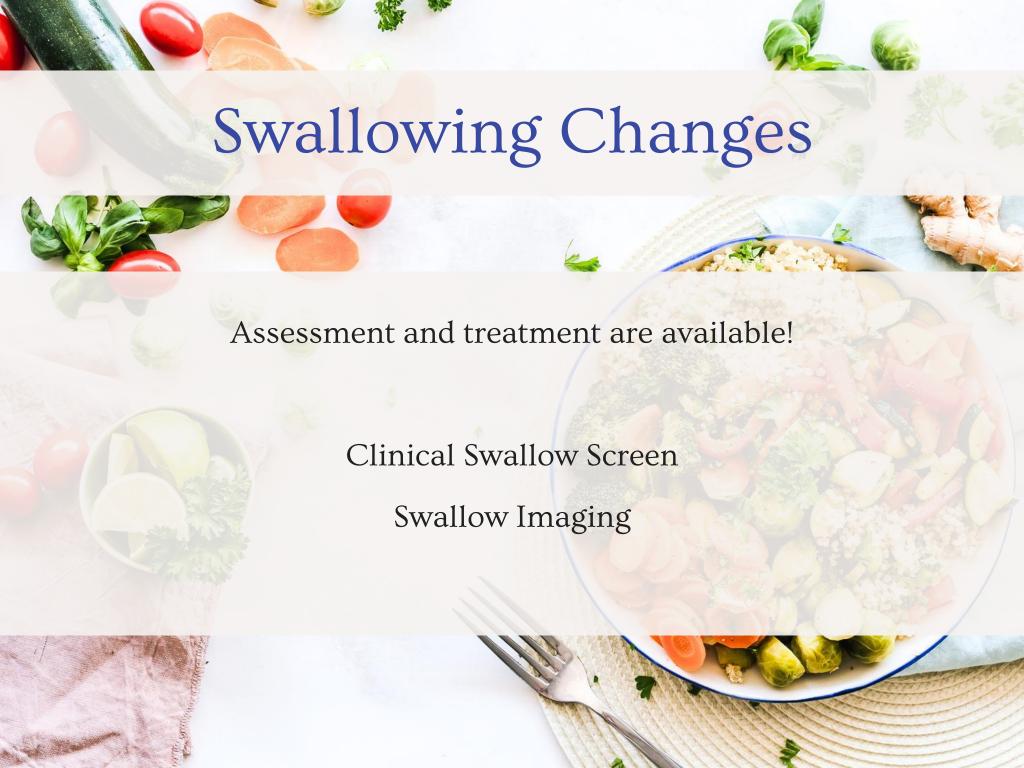
Swallowing fundamentals

Clinical Disorder of the Swallow

"Dysphagia"

Multiple types and causes of dysphagia

(also multiple treatments/interventions)

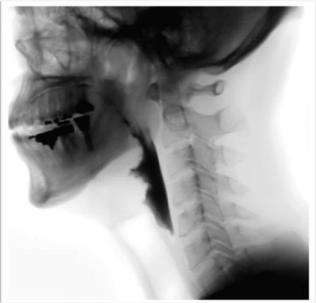


Professional Assessment

Clinical Swallow Evaluation (Bedside Swallow Screen)















Intervention

- Improve safety
- Improve efficiency
- Minimize risk

Treatment examples

• Strategies, texture adjustments, exercises



Audience Participation!

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When can an SLP support someone with PD?

- 1. Time of diagnosis
- 2. A few years after diagnosis
- 3. Late stage management
- 4. Any point in PD journey



Audience Participation!

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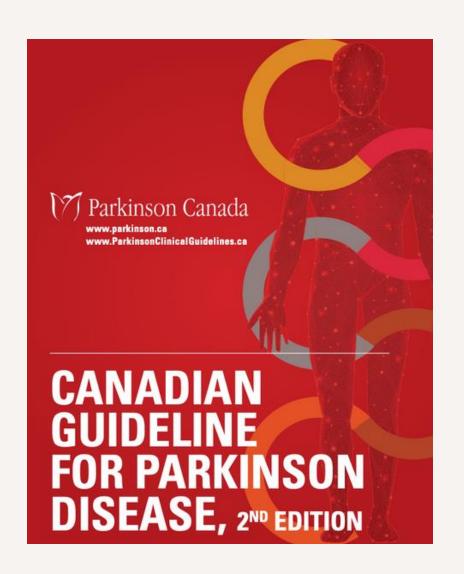
SLPs can offer support at all stages of PD.

- Time of diagnosis
- Throughout diagnosis
- Late stage management

Symptoms can occur at any point in PD progression.

Generally, public referral is available when symptoms interfere with quality of life, health, or wellbeing.





"A clear limitation to the implementation of this guideline is a lack of adequate access to health care providers with expertise in dealing with individuals with Parkinson disease."

(p. 11)

Public Options (Physician Referral)

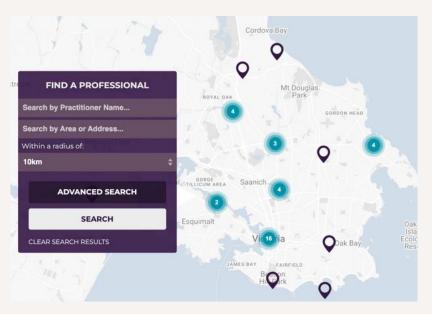
Parkinson's and Movement Disorders Clinic Victoria General Hospital Nanaimo Regional Hospital

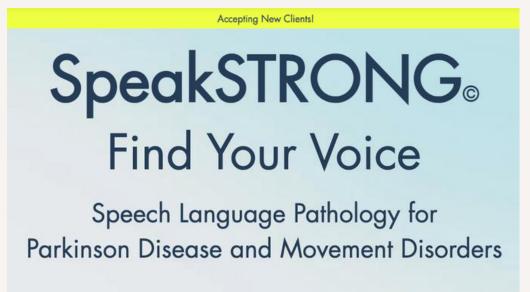


Private Options

Online tool from Speech and Hearing BC (SHBC) www.speechandhearingbc.ca

SpeakSTRONG Clinic for Parkinson Disease www.speakstrong.ca





Education Options

Parkinson Wellness Projects
Monthly SLP Education Seminars

https://parkinsonwellness.ca/speech-language-pathology



Thank you! Questions?