

Introduction

- Stuttering is a neurodevelopmental disorder
- Characterized by dysfluencies that disrupt the flow of speech¹
- Affects over 1% of general population; Causing communication, occupational, and psychological difficulties²

Brains in AWS

- Abnormalities in brain region involved in speech and language
- Neural signature of stuttering: Left inferior frontal cortex (IFC)²
- Left IFC: under activation during speech; disrupted white matter tracts underlying this area

Management:

- Novel: Transcranial direct current stimulation (tDCS)
- Non-invasive brain stimulation; alters neuronal activity
- Studies on fluency enhancing effects of tDCS+ behavioral intervention show positive outcomes
- However these results are reported from short-term intervention (lasting up to 6 sessions)^{3,4,5}

AIM

To examine the effect of extended duration of tDCS on dysfluencies in adults who stutter (AWS)

Materials and Method

- Soterix 1x1 tDCS stimulator
- Elastic straps, sponge pads, measuring tape, marker, saline
- Audio recorded samples for choral speech task

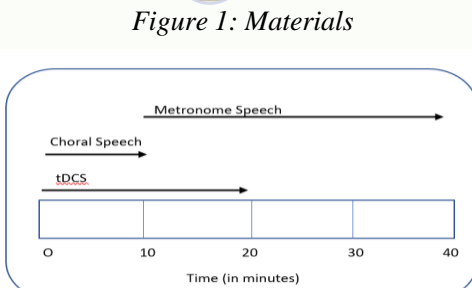


Figure 1: Materials

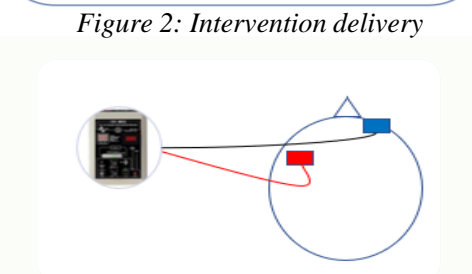
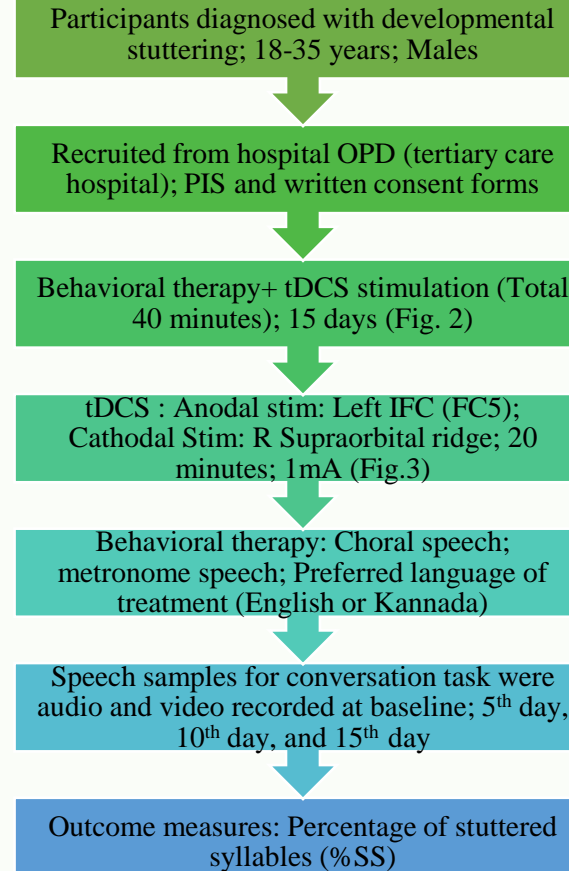
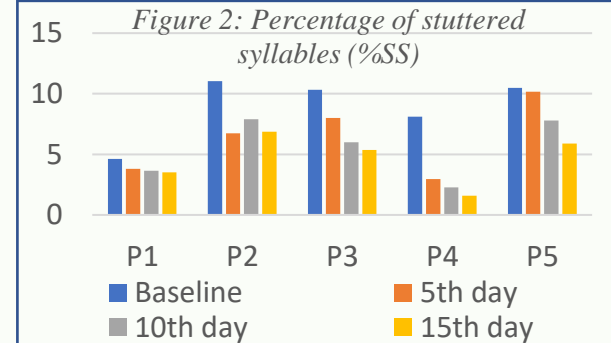


Figure 3: Stimulation site



Results & Conclusion



- This preliminary data from an ongoing larger trial shows the beneficial effect of extended duration of cortical stimulation in AWS
- Extended sessions of brain stimulation and speech therapy, as opposed to the currently used 5-6 sessions, showed further reduction in dysfluencies
- P2, P3, P4, and P5 showed clinically significant reduction in dysfluencies post 15 days of intervention
- These findings support our assumption that extending the tDCS with concurrent speech therapy could help optimize the treatment outcome in adults who stutter

References

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