

Speech & Swallowing in Parkinson's



Do I have a communication issue?

- Do others say or seem like they can't hear or understand me?
- Do I avoid phone calls?
- Do I have to work extra hard to be heard or does my voice tire easily?
- Do I lose my train of thought often?
- Is it hard to find the right words in conversations?
- Do I feel left out of conversations?

Do I have a swallowing issue?

- Do my food or pills feel "stuck" in my throat?
- Do I need to clear my throat often when drinking or eating?
- Does it take me longer to eat than others?
- Have I lost weight without trying?
- Do I feel like I have too much (or too little) saliva?
- Do I often have heartburn or a sore throat?

Speech and swallowing challenges are common in Parkinson's disease (PD) and can interfere with important parts of life, like enjoying favorite foods or participating in conversations with family and friends.

Quick Facts

- Parkinson's causes movements to become smaller and slower over time, which can impact the complex system of movements in the face, mouth, throat and chest involved in speaking and swallowing.
- Parkinson's can affect awareness and perception, making it difficult for people with PD to recognize speech, voice and swallowing changes.
- Working with a speech-language pathologist is the main treatment for speech and swallowing difficulties in Parkinson's.

Early evaluation and treatment can improve quality of life and help reduce and manage more serious speech and swallowing issues later.

Communication Issues in Parkinson's

Voice and speech changes are often the earliest signs of Parkinson's, but not everyone with PD will have the same issues. Common difficulties include speaking softly, using a monotone voice, slurring words, mumbling and stuttering. For some people, thinking changes can make it harder to find the right word, focus on conversations or get a sentence started. Sometimes limited facial expression or unintended body language can cause miscommunication.

Swallowing Issues in Parkinson's

Many people with PD experience some difficulty with swallowing (called dysphagia). Swallowing problems can be mild, such as taking longer to finish a meal or having trouble swallowing pills. More serious swallowing issues include weight loss, choking or aspiration pneumonia — an infection caused by food or liquid entering the lungs that can lead to death.

Parkinson's can make swallowing less automatic, which can result in too much saliva or drooling.

How are speech and swallowing problems addressed?

Working with a speech-language pathologist (SLP) is the main treatment for speech and swallowing difficulties. SLPs specialize in evaluating and treating speech, voice, language and communication issues, including those caused by thinking changes. They evaluate and treat swallowing problems as well. Adjusting PD medications may also help speech and swallowing problems, particularly when these issues worsen during "off" times.

Resources

Contact LSVT Global, Parkinson Voice Project or the Parkinson's Foundation Helpline to find a therapist with PD experience:

LSVT Global
lsvtglobal.com
888-438-5788

Parkinson Voice Project
parkinsonvoiceproject.org
833-375-6500

Learn more about speech and swallowing and Parkinson's. **Download or listen to Speech and Swallowing: A Body Guide to Parkinson's Disease at Parkinson.org/Library.**

Helpline

Get answers to your PD questions and receive referrals when you **contact our Helpline at 1-800-4PD-INFO or Helpline@Parkinson.org.**

We are here to help.

How are speech and swallowing issues evaluated?

An SLP will complete a detailed medical history, evaluate the movements in your face, lips, tongue and jaw and assess your speech, voice and swallowing. If swallowing is a concern, the SLP will ask you to describe any challenges. This is often followed by a video X-ray/modified barium swallow test or a Fiberoptic Endoscopic Evaluation of Swallow (FEES) to evaluate swallowing safety and decide which areas to target.

What can I expect in a speech or swallowing therapy session?

- Parkinson's varies greatly from person to person. A therapy plan should be individualized to your particular symptoms and goals.
- During speech therapy, an SLP will provide exercises for clearer speech, muscle strengthening and communication strategies for you and your care partners. Sometimes tools such as an amplification or feedback device are recommended to help with a louder voice.
- Swallowing therapy focuses on strengthening muscles used for breathing, coughing and swallowing — sometimes using expiratory muscle strength training (EMST). The SLP may recommend diet changes and eating/drinking techniques to help with swallowing safety.

Studies show that speech and swallowing improve more rapidly when therapy is combined with ongoing daily practice. Re-evaluation and short therapy tune-ups are recommended every few years to stay on track.

How can I find a speech-language pathologist?

Ask your primary care doctor or Parkinson's doctor for a referral. There are programs led by certified speech-language pathologists with special training in Parkinson's. Lee Silverman Voice Treatment (LSVT) LOUD and Parkinson Voice Project SPEAK OUT! are two evidence-based programs available throughout the U.S. and abroad. Both programs focus on helping people with PD improve speech and swallowing by practicing these activities with more strength and awareness.

For Speaking Louder and Clearer

- ✓ Breathe before you speak.
- ✓ Speak louder than feels natural.
- ✓ Organize your thoughts before speaking.
- ✓ Practice your loud voice daily.



Care Partner Tip

- ✓ Try to be in the same room and face-to-face when communicating.

For Maintaining Swallowing Safety

- ✓ Reduce distractions during mealtimes.
- ✓ Be mindful of chewing your food well.
- ✓ Focus on a strong swallow when eating.
- ✓ Talk to your doctor if you have difficulty taking pills.

Care Partner Tip

- ✓ Make eating and drinking your only focus during mealtimes.

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