

DIZARTRIJA KOD AMIOTROFIČNE LATERALNE SKLEROZE – PRIKAZ SLUČAJA

Amiotrofična lateralna skleroza (ALS) je neuromuskularna bolest koja uzrokuje brzo propadanje motornih neurona u korteksu, moždanom deblu, leđnoj moždini i kortikobulbarnom traktu. Ujedno je i jedna od najčešćih neuromuskularnih bolesti (Plowman, 2015). Češće se pojavljuje u muškaraca nego u žena, a simptomi započinju najčešće između 40 i 70 godine života (Hanson i sur., 2011).

Jedan od najčešćih simptoma ALS-a je i dizartrija, što čini logopeda važnim čimbenikom u terapiji osoba s ALS-om. Različiti autori navode cijeli spektar promjena u govoru koji se javljaju kod pacijenata – akustičke promjene glasa, velofaringealna disfunkcija, fascikulacije jezika, usporen tempo, narušena artikulacija, hipernazalnost i dr. (Hanson i sur., 2011). Uz ove teškoće, u uznapredovalim stadijima bolesti javlja se i potreba za logopedskom intervencijom zbog teškoća gutanja i upotrebe AAK (Morris i sur., 2006).

Cilj ovoga rada je video isječcima prikazati slučaj 68-godišnje pacijentice kojoj je unatrag tri godine dijagnosticirana amiotrofična lateralna skleroza. Pacijentica je uključena u logopedsku terapiju u Poliklinici SUVAG od početka 2020.godine.

Pacijentica je upućena na logopedsku terapiju od strane neurologa, odmah prilikom donošenja dijagnoze. Budući da je pacijentica uključena u logopedsku terapiju u prvoj fazi bolesti, kada su odstupanja u govoru najmanja, cilj logopedске terapije bio je zadržati postojeću razumljivost govora i pokretljivost govornih organa što dulje.

U logopedskoj terapiji naglasak je stavljen na modifikaciju govornog disanja, pokretljivost govornih organa, preciznost artikulacije, jačinu i razumljivost govora, repetitivnog, kao i spontanog.

Pacijentica je kombinacijom navedenih vježbi i rada kod kuće prema uputama logopeda, uspjela zadržati zadovoljavajuću razinu razumljivosti svakodnevnoga govora, količinu socijalnih kontakata, razumljivost telefonskoga govora i općenito zadovoljstvo kvalitetom života.

Iz svega navedenoga, vidljivo je da rana logopedska intervencija u neuromuskularnim bolestima, uz primjerenu podršku drugih stručnjaka, omogućuje duži period kvalitetnog svakodnevnog života i zadovoljstvo pacijenata.

Ključne riječi: *amiotrofična lateralna skleroza, logopedska intervencija, dizartrija, kvaliteta života*

DYSARTHRIA IN AMYOTROPHIC LATERAL SCLEROSIS – CASE STUDY

Amyotrophic lateral sclerosis (ALS) is a fatal neuromuscular disease, causing rapid degeneration of motor neurons in cerebral cortex, brainstem, spinal cord, and corticobulbar tracts. ALS is one of the most common neuromuscular diseases (Plowman, 2015). It occurs more commonly in men than women with symptoms typically appearing between the ages of 40 and 70 years (Hanson et al., 2011).

One of the most common ALS symptoms is dysarthria, making speech and language therapist an important factor in therapy. Different authors set whole spectrum of speech symptoms in ALS – acoustic voice changes, velopharyngeal dysfunction, tongue fasciculation, reduced speech rate, defective articulation, hypernasality etc. (Hanson et al., 2011). With disease progression, SLT intervention is important in managing dysphagia and considering use of AAC (Morris et al., 2006).

The aim of this paper is case-study of a 68-year-old female patient, diagnosed with ALS three years ago, presented in video clips. Patient is included in speech and language therapy in Polyclinic SUVAG in the beginning of 2020.

Speech and language therapy was referred by the neurologist, as soon as diagnose was set. Since the patient is included in therapy in early phase, when speech deviation was minimal, the aim of the therapy was to keep the current speech intelligibility and speech motor function as long as possible.

In speech therapy accent is put on modification of vocal breathing, speech motor function, articulation precision, speech intensity and intelligibility, in repetition and spontaneous speech.

The patient is by combining these speech exercises at home and with speech therapist, managed to maintain a satisfying level of speech intelligibility, social contact, intelligibility of telephone communication and in general, is satisfied with her quality of life.

It is obvious that early speech and language intervention in neuromuscular diseases, with appropriate support of other experts, enables longer period of quality of life and patient's satisfaction.

Key words: *amyotrophic lateral sclerosis, speech and language intervention, dysarthria, quality of life.*