Ataxic Dysarthria

- results from cerebellar damage
- deficits in coordination
- inaccuracy in force, range, timing and direction of speech movement
- bilateral or diffuse damage

Etiology

- same as all others - toxic-metabolic - acute or chronic alcoholism
- antiseizure meds or psychotrophic drugs
- hypothyrodism
- normal pressure hydrocephalus

Cerebellar Damage

- truncal ataxia; difficulty standing and walking
- titubation
- nystagmus
- hypotonia
- dysmetria
- disdiadochokinesis
- intention tremor

Patient Perceptions

- slurred speech
- inability to coordinate speaking with breathing

Nonspeech Oral Sxs

- oral mech often normal
- AMR’s irregular

Speech Characteristics

- Speech AMR’s most revealing: irregular
- articulatory inadequacy
- prosodic excess
- phonatory-prosodic insufficiency

Best Distinguishing Features

- irregular and transient articulatory breakdowns
- irregular AMR’s
- vowel distortions
- excess and equal stress
- excess loudness variations
- dysprosody