Hyperkinetic Dysarthria
- basal ganglia/extrapyramidal lesions
- characterized by dyskinesia; bizarre
- movement disorder often presents in orofacial musculature
- speech problems often early sx

Etiology
- toxic-metabolic
- Tardive dyskinesia
- Sx’s: involuntary oral movements
  - antipsychotic drugs, antiseizure meds
  - 60% sx remission following drug withdrawal
  - remission over 3 years

Two Primary Categories
- quick hyperkinesias; slow hyperkinesia
- both characterized by abnoraml involuntary movement
- movement disorder disappears during sleep; increased with stimulation

Types of Quick Hyperkinesias
- Myoclonus
- Tics
- Chorea
- Ballism

Types of Slow Hyperkinesias
- athetosis (in kids, cp)
- dystonia
  - blepharospasm
  - spasm
dystonia
  - spastic torticollis
- spasm
- tremor

Tremor
- resting
- postural
- action
- terminal
- essential

Patient Complaints, Nonspeech Sxs, Speech Sx’s
- dependent on type of movement disorders

Example: Chorea
- speech structures and function appear normal
• abnormality seen as motor unsteadiness
• speech characteristics variable but pathognomonic
• major features affect respiration/phonation, articulation and prosody

9  Speech Characteristics
• unsteadiness in vocal tone during vowel prolongation
• adventitious movement of jaw, face, tongue
• variable pattern of interference of abnormal movements on articulation, episodes of
  • hypernsalsity, harshness, breathiness, loudness

10  Example: Dystonia
• irregular articulation breakdown
• distorted vowels
• voice stoppages
• strained quality