Maximizing Verbal Speech & the Use of Simple & Inexpensive Communication Methods for ALS Patients

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Changes in the way someone speaks are often experienced by person with ALS (PALS). These may start as mildly slurred speech due to decreased movement of the tongue and lips and/or reduced loudness due to respiratory or vocal cord inefficiencies. This neurological change in speech is called dysarthria. Because ALS impacts muscle movement and strength, the speed and accuracy of the muscles of the mouth and throat are reduced. Speaking something that has been taken for granted for so many years, is now different and difficult. Some techniques for improving your verbal communication are:

1. Get the full attention of your listener
2. Speak slower to allow your muscles to move into place
3. Speak each syllable like a separate word
4. Take a good breath and only speak a few words with each breath
5. A voice amplifier may help if voice is weak
6. Sometimes a palatal lift prosthesis can help if nasality is the main problem
7. A qualified speech language pathologist can assist you with more techniques

Augmentative alternative communication (AAC) refers to a method of communicating other than speech. It can be writing, use of a picture or letter board, sign language, morse code or the use of a specialized communication device or computer. Augmentative systems are used to "augment" speech when some speaking abilities still exist. Alternative systems are used and referred to when no speech exists.

Low tech/low cost equipment like communication boards are a vital and important piece of equipment to start with. Even if a more costly and sophisticated system is eventually selected, obtained and used, low-tech options continue to be necessary tools. These letter or phrase boards can be utilized by pointing or "scanning". If a PALS can point or write, that is the easiest way to select letters, words or phrases. There may come a time when hand use is impacted and another way to select letters is necessary. Scanning is then an option.

Scanning, in this case, refers to having the listener scan the board with their finger until a selection is made by the communicator. There are many ways of doing this. One example would be to have an "ABC" board in the shape of a square, with numbers 1-5 across the top and left side. Choosing the numbers 2 and 3 may signify the letter "H" (see example board below). Eye blinks can also be used (5 blinks then 2 blinks means a “J”). The listener would need to write the letters on a sheet of paper or small computer after the PALS has chosen it so that they can keep track when longer words, phrases and sentences are being relayed.
It is very important that a Yes/No system is developed and changed if necessary. This may be a differentiated eye blink (one vs. two blinks, hard vs. soft blink, blink vs. non-blink) or anything else that the PALS can do fairly easily (look up vs. look down, move a finger, etc.). This Yes/No system should be posted in the room so that all caregivers use it consistently.

Another recommendation for PALS would be to come up with 100 (more or less) most commonly used phrases and number them 1-100 and keep them in a special folder close to the PALS. A signal from the PALS that one of these phrases is to be communicated is made. One PALS clicks or grinds his teeth to communicate this, another may make some vocalization or sound to call attention. At this point, the listener may clarify, “you want to tell me something?” The listener then processed with a “verbal scan of numbers... “1-10? 11-20?” and so on until the PALS acknowledges yes. The particular phrase is then pinpointed. Phrases and statements can also be divided into such areas as emotions, body functions and needs, food and drink, TV shows and entertainment, questions about family, etc. The areas are almost limitless.

Special Eye Gaze or ETRAN boards are also available. The ALS Association loan closet has some of these available.

A qualified speech language pathologist can assist with recommendations for enhancing and maximizing verbal speech as well as coming up with functional communication systems.

Referral to a speech language pathologist is a process that generally needs to go through your physician.