

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

دکتر محمدی سلفیعی ثابت عضو هیات دانشگاه علوم پزشکی تهران



**گروه پزشکی خانواده با همکاری بیمارستان ضیاییان  
و دانشکده توانبخشی برگزار می کند:**

## روش‌های نوین در درمان اختلالات حرکتی گفتار با رویکرد نوروساینس

**دبیر علمی: دکتر مهدی شفیعی ثابت**



✳️ مدرسین به ترتیب سخنرانی:

دکتر مهدی شفیعی ثابت استادیار - متخصص نورولوژی

دکتر آذر مهری دانشیار - PhD گفتاردرمانی

دکتر نسیم عبادتی استادیار - متخصص پزشکی خانواده

ثبت نام از طریق:

سامانه مرکز آموزش مداوم دانشگاه علوم پزشکی تهران

یا کد شناسه ۱۸۶۳۸۴

شنبه

۱۴۰۱-۱۱-۱

ساعت ۱۶-۱۹

ارائه از طریق لیتک:

[https:// www.skyroom.online/ch/virtualtums/ziaian-hospital](https://www.skyroom.online/ch/virtualtums/ziaian-hospital)

# Skills which are related to nervous system:

Appropriate movements

Communication (verbal and non verbal; )

Attention

Learning (the ability to catch a new skill or increase its quality) and memory

Decision making and Problem Solving

Appropriate behavior (social interaction, not restricted behavior)

# Verbal communication

Verbal communication is the use of words to share information with other people. It can therefore include both spoken and written communication.

The verbal element of communication is all about the words that you choose, and how they are heard and interpreted.

# non-verbal communication:

Eye contact,

body language (Body movements include gestures, posture, head and hand movements or whole body movements)

Elements of voice (such as pitch, tone, and speed of speaking), and facial expressions.

# Spoken Verbal communication

A) Language (a cognitive process)

B) Speech

# Speech systems:

- a) respiratory
- b) phonation: the production of vocal sounds
- c) articulation: the formation of clear and distinct sounds in speech.
- d) resonance: the voice quality that results from sound vibrations in the pharynx (throat), oral cavity (mouth) and nasal cavity (nose)
- e) prosody: refers to intonation, stress pattern, loudness variations, pausing, and rhythm. We express prosody mainly by varying pitch, loudness, and duration. We also may use greater articulatory force to emphasize a word or phrase.

# Language disorder:

Aphasia: is a language disorder that is caused by damage to the language region (dominant lobe) of brain and is most commonly seen after a stroke. This makes it difficult to speak, write, read and/or understand what is being said.



# Motor Speech disorders

## 1- Stuttering:

a speech disorder that involves frequent and significant problems with normal fluency and flow of speech. People who stutter know what they want to say, but have difficulty saying it.

Acute stuttering can be seen in; CVA, head trauma and severe fear

## 2- Apraxia: trouble saying what the patient wants to say correctly and consistently.

3- Dysarthria: occurs when the muscles used for speech are weak or the patient has difficulty controlling them. Dysarthria often causes slurred or slow speech that can be difficult to understand. This can be due to injury in any part of motor system including: motor cortex (like stroke), cerebellum, striatum (like PD with hypokinetic dysarthria or Wilson disease with dystonic dysarthria), lower motor neuron (like Guilan Barre syndrome), NMJ (like MG), and muscle (like myopathies)

# Wilson Disease:

Symptoms are Dysarthria, Dysphagia, KF circle, seizure, and tremor.

medical treatments are: Penicillamin, Trientine, and Zn sulfate

**MG:**

Symptoms are Dysarthria, Dysphagia,  
diplopia, and eye lid drooping

از توجه شما متشکرم