

Childhood Apraxia of Speech

What is Childhood Apraxia of Speech?

- Childhood Apraxia of Speech (CAS) is a speech disorder characterized by:
 - Difficulty with saying sounds, syllables, and words
 - Motor planning difficulties; CAS is a motor speech disorder – in this case, that doesn't mean that the speech muscles are weak, it means that coordinating the movements for speech is particularly difficult
 - Young children may have limited cooing and babbling, and may not demonstrate mastery of many consonants and vowels; they may also pause between sounds, and will probably have more sound deletions than is typical for a young child
 - Older children with CAS often make inconsistent errors and are very difficult to understand; the longer a word, phrase, or sentence, the more errors they tend to make; you may also notice groping motions, as if they are having difficulty getting their lips, mouth, and tongue where they want them to be to make a specific speech sound or syllable combination

How do we diagnose Childhood Apraxia of Speech?

- We use standardized tests (tests that compare a child's performance to other children who are the same age as them, but have typically developing speech), in addition to conversational speech samples.
- We also do an oral motor exam to make sure that there is not a structural/anatomical issue at hand. We also get great information from this assessment in terms of a child's motor coordination.
- For a child who presents with disordered speech, but it is not immediately obvious how the speech is disordered, we might use the Goldman Fristoe Test of Articulation, which is the gold standard for assessing pediatric speech.
- For a child who presents with many characteristics of CAS, we sometimes use the Kaufman Speech Praxis Test for Children, which can be particularly useful for planning treatment goals as it assesses syllable structure in particular.

How do we treat Childhood Apraxia of Speech?

- Treatment focuses on expanding the types of syllable structures that a child can produce.
- We start with easy syllable structures, like CV (consonant-vowel), like "boo", or VC (vowel-consonant), like "up"
- We gradually increase the complexity of syllable and sound structures.
- For children who have language delays as well, we address speech and language simultaneously and in the most naturalistic manner possible.
- As children get older, we also address prosody (the melodic shape of speech).

- If a child has severe CAS, we may also teach the child sign or use alternative/augmentative communication to ensure that they can communicate and maintain their expressive language development.

References:

American Speech, Language, and Hearing Association. (2015). *Childhood Apraxia of Speech*.
www.asha.org/public/speech/disorders/ChildhoodApraxia/