



Speech-Language Pathology

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What Is A Resonance Disorder?

Hypernasal Speech

- This is the term used to describe a child's speech when there is too much air coming out of the nose. The passageway in the back of the throat is not being blocked off well enough to allow all the air to come out of the mouth.
- Causes
 - Cleft Palate – the hard and/or soft palate has not completely formed
 - Velopharyngeal Insufficiency (VPI)
- The muscle in the back of the throat is not strong enough or,
- The muscle is too short to close off the passage to the nose.
 - Sound Specific Hypernasality – the child has just some sounds where the air is coming out of the nose
- Treatment
 - Speech therapy can often be helpful in managing hypernasal speech. This is particularly true when addressing Sound Specific Hypernasality. Strategies include:
 - Low tech – placing a mirror under the nose for feedback
 - Having the child place his hand on his nose to feel extra vibration.
 - High tech – using specialized feedback equipment such as the Nasometer II

- Have the child pinch his nose to feel the airflow out of his mouth.
 - Should there be a cleft palate or VPI on all sounds, the child should be evaluated by either an otolaryngologist (ENT) or a craniofacial team. These professionals can better determine if a medically managed approach should be taken.

Hyponasal Speech

- This is the term used to describe a child's speech when there is not enough air coming out of the nose. The child may sound like he is talking with a cold all the time.
- Causes
 - This is most often caused by large adenoids. Children who suffer from this often also have sleep apnea and snore. The child sometimes has speech that sounds "muffled" or is difficult to understand.
- Treatment
 - Children with this type of resonance should be evaluated by an ENT, to determine if the adenoid tissue is too large and is compromising the airway.
 - Speech therapy may be needed after the removal of adenoids to help the child become used to having the airflow coming out of the mouth. Often times, speech therapy is not needed.
 - A therapy strategy may be simple. Have the child put his fingers on his nose while talking. This helps him to help feel sound vibrations.
 - Other therapy activities include the use of the Nasometer II. This provides visual feedback regarding the amount of air that should be escaping from the nose.