STRETCH-AND-FLOW VOICE THERAPY FOR MUSCLE TENSION DYSPHONIA: TREATMENT OUTCOMES FROM TWO CLINICAL TRIALS

C.R. Watts
Davies School of Communication Sciences & Disorders, Texas Christian University
c.watts@tcu.edu

Stretch-and-Flow (SnF) voice therapy is a treatment approach used to rehabilitate vocal function secondary to hyperfunctional voice impairments. Also known as flow phonation, this approach was first described by Stone and Casteel in the early 1980’s. The fundamental target in SnF is to initiate volitional control over vocal subsystems, using voiced and unvoiced airflow stimuli, while maintaining a perception of minimal muscular effort during phonation. As with many voice interventions, clinical outcome research is needed to scientifically validate and further our understanding of SnF applied to different populations with voice disorders. As evidence for the effectiveness of specific voice interventions continues to grow in the literature, greater specificity and control of the processes studied in those interventions will allow clinicians and clinical scientists to better understand which characteristics of specific interventions maximally impact vocal rehabilitation.

This presentation will describe two recent scientific investigations that studied the effectiveness of SnF in clinical populations with primary muscle tension dysphonia (MTD). Findings from a randomized controlled crossover experiment will be reported which will provide the audience with outcome evidence from (a) a group of speakers with MTD who received the SnF treatment compared with a no-treatment MTD control group; and (b) a group of speakers with MTD who received the SnF treatment compared to a group of speakers with MTD who received an alternative treatment, specifically resonant voice therapy. The presentation will provide the audience with data from acoustic, perceptual, and self-perceived handicap assessments which revealed the following: (1) speakers with MTD who received SnF voice therapy demonstrated significantly greater improvements post-treatment compared to a control group; and (2) speakers with MTD who received SnF voice therapy and resonant voice therapy both improved on measures at post-treatment compared to pre-treatment. The presentation will also describe and demonstrate the framework and application of SnF voice therapy.