

EVIDENCE-BASED PRACTICE

1. Definitions of Evidence-Based Practice

- **Sackett's 3 strand model of EBP (evidence, therapist's judgement, patient's condition & preferences)**

'the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients'

Sackett et al 1997

- **Culyer's statement of expectation for all therapists**

*"It is not expected that all clinicians will be research-active,
but it is expected that all clinicians will be active users of research"*

Supporting Research and Development in the NHS,

A.Culyer, 1994



- **Distinctive definitions of ...**

- **Research active** = *working to generate research evidence, including therapists undertaking small-scale research within their own practice*
- **Research use/utilisation** = *application of findings from published research into a new setting*
- **Evidence-Based Practice** = *being accountable for clinical decision-making that is explicitly and transparently based on consideration of the 3 strands defined by Sackett*

- **Sackett's 5 step model of the EBP cycle**

1. Frame a clinical question (for a single patient or for a client group)

2. Search for best available, current, high quality evidence
3. Appraise the evidence
4. Implement change in clinical practice (if supported by the evidence)
5. Evaluate impact of the change

- **Challenges of EBP for SLTs (from Sackett's 5 step model)**

- Skills and resources for searching electronic databases
- Awareness and understanding of research designs
- Skills and confidence in critical appraisal of research publications
- Skills and relevant outcome measures for evaluating impact of changes in clinical practice

Hence the rationale for the inclusion of the selected resources provided on this website

2. Links to on-line resources

SpeechBITE™ is a database that provides open access to a catalogue of Best Interventions and Treatment Efficacy across the scope of Speech Pathology practice

<http://www.speechbite.com/>

EBP Network was established in May 2002 for speech pathologists to share the task of evidence-based practice in a collaborative forum

http://www.ciap.health.nsw.gov.au/specialties/ebp_sp_path/index.html

ASHA Compendium of EBP Guidelines and Systematic Reviews

<http://www.asha.org/members/ebp/compendium/>

The Library of the Cochrane Collaboration

<http://www.thecochranelibrary.com/view/0/index.html>

Search engine from NHS Evidence for health and social care professionals, providing access to evidence-based health information

<http://www.evidence.nhs.uk/>

The Critical Appraisal Skills Programme (CASP) at the University of Oxford, UK has excellent critical appraisal checklists freely available on their web site

<http://www.phru.nhs.uk/Pages/PHD/CASP.htm>

The School of Health and Related Research (SchARR), University of Sheffield, UK hosts a wide range of free access tutorials, including some excellent guides to searching electronic databases <http://www.shef.ac.uk/scharr/ir/netting>

Psychological Database for Brain Impairment Treatment Efficacy: <http://www.psycbite.com>

Database of Abstracts of Reviews of Effects: <http://www.crd.york.ac.uk/CRDWeb/AboutDare.asp>

Turning Research into Practice Database: <http://www.tripdatabase.com>

International Guideline Library: <http://www.g-i-n.net/>

Evidence-based Practice Centers: <http://www.ahrq.gov/clinic/epc/>

3. Selected recommended references

Bury, T. & Mead, J. (1998) Evidence-based Healthcare: A Practical Guide for Therapists. London: Butterworth-Heinemann.

Greenhalgh, T. (2001): How to read a paper: the basics of evidence-based medicine. BMJ Publications, 2nd Ed.

Reilly, S., Douglas, J. and Oates, J. (2004) Evidence Based Practice in Speech Pathology. London: Whurr.

Roddam, H. and Skeat, J. (2010) *Embedding Evidence-Based Practice in Speech and Language Therapy: International examples.* London: Wiley-Blackwell

4. Guidelines and resources per clinical area

- Aphasia [ref1](#)
- Cleft Lip and Palate [ref2](#)
- Dementia [ref3](#)
- Developmental Speech and Language Disorders [ref4](#)
- Dysphagia [ref5](#)
- Fluency Disorders [ref6](#)
- Hearing Impairment [ref7](#)
- Specific Learning Disorders [ref8](#)
- Motor Speech Disorders [ref9](#)
- Voice Disorders [ref10](#)

5. Journals

A list of journals relevant to SLTs [ref11](#)

WORKING GROUP: Marjolein Coppens (NL), Liisa Miettinen (FI), Zuzana Oravkinova (SK), Thierry Rousseau (FR), Valdis B. Gudjonsdottir (IS), Jutta Chibidziura / Heike Munch (AT), Vilma Makauskiene (LT), Fiona Hill (IE), Raffaella Citro (IT), Youri Maryn (BE), Hazel Roddam (UK)

APHASIA

Guidelines

<http://www.sign.ac.uk/guidelines/fulltext/118/index.html>

Management of patients with stroke: rehabilitation, prevention and management of complications, and discharge planning (UK)

<http://www.aphasie.org/index.php?id=157>

Lignes directrices pour la prise en charge des aphasies

L'objectif de ces recommandations est de mettre à disposition des médecins une aide à la décision pour le traitement logopédique ou neuropsychologique des adultes présentant une aphasie (Switzerland)

http://www.has-sante.fr/portail/upload/docs/application/pdf/rapport_orthophonie_reeducation_du_langage.pdf

Haute Autorité de Santé - Rapport Orthophonie Rééducation du Langage / A. Rééducation du langage dans les aphasies (France)

http://www.fli.it/downloads/linee_guida_afasia.pdf

Guidelines for the Logopedic Management of the Aphasic Patient, produced in collaboration with the Italian Association of Aphasics, and approved by the High Institute for Healthcare (Istituto Superiore di Sanità) (2009) (Italy)

http://www.awmf.org/uploads/tx_szleitlinien/030-090_S1_Rehabilitation_aphasischer_Stoerungen_nach_Schlaganfall_10-2008_10-2013.pdf *rehabilitation of aphasic disorders after stroke (S1)* (Germany)

<http://www.socialstyrelsen.se/nationellariktlinjerforstrokesjukvard>

Nationella riktlinjer vid strokesjukvård- National guidelines in case of stroke (Sweden)

http://www.logopedie.nl/bestanden/nvlf/kwaliteit/instrumenten/Richtlijn_Beroerte_def.pdf (The Netherlands)

http://www.rcslt.org/speech_and_language_therapy/commissioning/aphasia_plus_intro

Royal College of Speech & Language Therapists - Resource Manual for Commissioning and Planning Services for SLCN / Aphasia (UK)

Systematic reviews

<http://www.rehab.research.va.gov/jour/09/46/2/pdf/page185.pdf>

http://www.ebrsr.com/reviews_details.php?Aphasia-3
<http://stroke.ahajournals.org/cgi/content/abstract/34/4/987>

Intense therapy over a short amount of time can improve outcomes of speech and language therapy for stroke patients with aphasia.

<http://www2.cochrane.org/reviews/en/ab000425.html>

Speech and language therapy for aphasia following stroke /Cochrane review abstract

<http://www.demneuropsy.com.br/imageBank/PDF/v3n4a03-ing.pdf>

A review of Constraint-Induced Therapy applied to aphasia rehabilitation in stroke patients

<http://jslhr.asha.org/cgi/content/abstract/51/5/1282?maxtoshow=&hits=10&RESULTFORMAT=&fulltext=aphasia&searchid=1&FIRSTIND EX=0&resourcetype=HWCIT>

Evidence-Based Systematic Review: Effects of Intensity of Treatment and Constraint-Induced Language Therapy for Individuals With Stroke-Induced Aphasia

Journals

<http://www.journals.elsevier.com/brain-and-language/#description>

<http://aphasiology.pitt.edu/>

<http://stroke.ahajournals.org/>

Conferences

3rd Nordic Aphasia conference 2011 <http://www.afasiankuntoutustutkimus.fi/koulutus/2>

IARC, International Aphasia Rehabilitation Conference

Clinical Aphasiology Conference

CLEFT LIP AND PALATE

Guidelines

ACPA (American Cleft Palate and craniofacial Association): Parameters for Evaluation and Treatment of Patients with Cleft Lip/Palate or Other Craniofacial Anomalies

Target area/question	Methodology	Level of evidence	Answer/recomendation
Cooperation of SLT with surgeon, ENT and pediatrician	Consensus of experts	IV	Such a cooperation is needed. SLT evaluation serves as important source of information for planning of treatment of other specialits: surgical, orthodontical, prosthetic
How often should children's speech be evalutaed ?	Consensus of experts	IV	Annually and more often in children with identified speech and language problems
Evaluation ov velo-pharyngeal (VP) function	Consensus of experts	IV	Should consist of: articulatory performance, aerodynamic measures, videofluoroscopy, nasopharyngoscopy, and nasometric studies, all of which should be conducted with the participation of the team speech-language pathologist
What experience and qualification should have SLT providing therapy?	Consensus of experts	IV	SLT should work on interdisciplinary team; should be qualified according to national standards; should have enough new clients annually; should be experienced in cleft palate area;

Level of evidence is used according to AHCPR system (1992) – Annex 1

Eurocleft (1996-2000): Minimum standards of care in area of speech and language problems in CP children

Target area/question	Methodology	Level of evidence	Answer/recomendation
What kind of S/L therapy is recomended ?	Consensus of experts	IV	Early assessment of speech and language problems (does not say how early)

			Advice to parents Corrective therapy by experienced SLT
What experience should have SLT providing therapy?	Consensus of experts	IV	SLT should work in the multidisciplinary team SLT should have special training in area SLT should have sufficient number (40-50) of new cases in treatment annually
Finances	Consensus of experts	IV	S/L therapy should be covered by insurance companies or other national bodies
When should be assessment of S/L done?	Consensus of experts	IV	At 3, 6, 10, 18 years + before and after pharyngoplasty
What should assessment of S/L problems consist of	Consensus of experts	IV	Audiorecording Intelligibility Nasality Articulation

Reviews

Cochrane Library

Topic	Method	Results
Use of electropalatography in speech therapy in CP children	Systematic meta-analysis	Poor methodologies of overwiewed studies - no strong evidence for recomendation of the technique

Oravkinova Zuzana, 2010: Early intervention in cleft palate children (published in Slovakia)

Target area/question	Study	Level of evidence	Answer/recomendation

Does early intervention with CP children work?	Pamplona, Ysunza a Ramirez, 2004	Ib	yes
	Scherer, 2008	IIa	yes
	Blakeley a Brockman, 1995	IIb	yes
	Broen, 1993	III	yes

Annex 1

Level	Character of evidence (based on AHCPR* 1992)
Ia	Metaanalysis based on RCT - s
Ib	Well controlled RCT
IIa	Well designed controlled study without randomisation
IIb	Well designed quasiexperimental study
III	Well designed nonexperimental study: descriptive – case study, or comparative study
IV	Consensus of experts or conclusions of commissions of experts

Royal College of Speech and Language Therapists Guidelines, 2005

Target area/question	Methodology	Level of evidence	Answer/recomendation
What experience and qualification should have SLT providing therapy?	Bearn D, Mildinhall S, Murphy T, Murray JJ, Sell D, Shaw WC, Williams AC & Sandy JR (2001) Správa CSAG (1998)	III IV	SLT should work on interdisciplinary team
Cooperation of SLT with surgeon	Bardach J, Morris HL & Olin WH (1984) Shaw WC, Semb G, Nelson P, Brattstrom V, Molsted K & Prah-Andersen B (2000) Lohmander-Agerskov A, Friede H, Lilja J & Soderpalm E (1995) Witzel MA, Salyer KE & Ross RB	IIb III III IV III IV	SLT should inform surgeon about the results of S/L therapy SLT should be included into decision making about surgery on velopharyngeal mechanism

	(1984) Sommerlad BC, Henley M, Birch M, Harland K, Moiemmen N & Boorman JG (1994) Witt PD & D`Antonio LL (1993) Sommerlad BC, Mehendale FV, Birch M, Sell DA, Hattee C & Harland K (2002)		
Cooperation of SLT with ENT	Grant HR, Quiney RE, Mercer DM & Lodge S (1988) Broen PA, Devers MC, Doyle SS, Prouty JM & Moller KT (1998) Rach GH, Zielhuis GA & Broek van den P (1988) Teele DW, Klein JO & Rosner BA (1984)	IIb III III III	SLT should closely cooperate with ENT
Early monitoring of speech	Chapman KL (1993) Harding A & Grunwell P (1998) Grundy K & Harding A (1995) Harding A & Grunwell P (1996) Russell J & Grunwell P (1993) Golding-Kushner KJ (2001)	III III IV IV IV IV	Evaluation of speech and language should start after palatoplasty (usually at 6 -12 months)
Early counseling	Golding-Kushner KJ, Weller G & Shprintzen RJ (1985) Russell J & Harding A (2001) Golding-Kushner KJ (1994) Golding-Kushner KJ (2001) Hahn E (1989) Pamplona MC, Ysunza A & Jimenzen-Murat Y (2001) Pamplona MC, Ysunza A & Uriostegui C (1996)	III IV IV IV IV Ib Ib IIa IV	Should be provided to parents Counseling and intervention should involve parents as co-therapists, cooperation should start from stages of babbling

	Pamplona MC, Ysunza A (2000) Golding-Kushner KJ (2001)		
Feeding problems	Brine EA, Rickard KA, Brady MS, Liechty EA, Manatunga A, Sadove M & Bull MJ (1994) Shaw WC, Bannister RP & Roberts CT (1999) Clarren SK, Anderson B & Wolf LS (1987) Choi BH, Kleinheinz J, Joos U & Komposch G (1991)	Ib Ib III III	SLT may be involved in counseling about feeding problems
What should assessment of speech problems consist of	D`Antonio LL, Muntz HR, Province MA & Marsh JL (1988) Sell D, Harding A & Grunwell P (1999) Harding A & Grunwell P (1996) Trost JE (1981) Kuehn DP (1982) McWilliams BJ & Philips BJ (1979)	III IV IV IV IV IV	Nasality Nasal emissions Facial grimacing Quality of voice Articulation And other accompanying factors: oral structures, hearing, dental occlusion, lip movements, nasal airways, social and emotional problems and syndromes
What should assessment of language problems consist of	Chapman KL, Graham KT, Gooch J & Visconti C (1998) Neiman GS & Savage HE (1997) Broen PA, Devers MC, Doyle SSProuty JM & Moller KT (1998)	III III III III III	Language skills should be assessed, especially expressive

	Golding-Kushner KJ, Weller G & Shprintzen RJ (1985) Sherer NJ & D`Antonio LL (1995)		
Assessment of velopharyngeal function	Heningsson GE & Isberg AM (1986) Dalston RM, Warren D & Dalston E (1991a) Dalston RM, Warren D & Dalston E (1991b) Dalston R & Warren D (1986) Witt PD & D`Antonio LL (1993) Dalston RM, Warren D & Dalston E (1991b) Dalston R & Warren D (1986) Witt PD & D`Antonio LL (1993)	III III III IV III III IV	Must be provided Should consist of visualization of sfincter Should use videofluoroscopy or nasoendoscopy, perceptual assessment and measurement of oral air flow
What should therapy for speech problems consist of	Albery L & Enderby P (1984) Grunwell P & Dive D (1998) Golding-Kushner KJ (1994) Golding-Kushner KJ (2001) Russell J & Harding A (2001) Michi K, Suzuki N, Yamashita Y & Imai S (1986) Gibbon F, Cramplin L, Hardcastle W, Nairn M , Razzell R, Harvey L & Reynolds B (1989) Dent H, Gibbon F & Hardcastle W (1992)	Ib III IV IV IV III IV IV	Should target articulation and phonological skills May include electropalatography
Therapy to eliminate VP insufficiency, hypernasality and nasal emissions: non-speech excercises	Ruscello DMA (1982) Starr CD (1990)	IV IV	Blowing, sucking, massaging, palate excercising, interrupted swallowing, puffing up cheeks, stimulating of vomiting reflex: are not recomended to most patients

Therapy to modify hypernasality: auditory discrimination, loud fortified speech, slow speech, wider opening of mouth	D`Antonio LL (1992) Sell D & Grunwell P (2001)	IV IV	Use of these techniques is recommended only with visual feedback (nasometry, nasoendoscopy, videofluoroscopy..) and full understanding of possible benefits by patient. Not recommended when decision making about treatment is too late.
Therapy with visual feedback	Ysunza M, Pamplona T, Femat I, Mayer A & Garcia-Velasco M (1997) Kawano M, Isshiki N, Honjo I, Kojima H, Kurata K, Tanokuchi F, Kido N & Isobe M (1997) Siegel-Sadewitz VL & Shprintzen RJ (1982) Witzel MA & Posnick JC (1989) Golding-Kushner KJ (1994)	Ib I II III III IV	Is still experimental, but may be effective in some patients with inconsistent VP insufficiency
Therapy working with correct production of consonants	Harding A & Grunwell P (1998) Peterson-Falzone S & Graham MS (1990) Hoch L, Golding-Kushner K, Siegel-Sadewitz VL & Shprintzen RJ (1986)	III III IV	May eliminate hypernasality in phoneme-specific VP incompetency (dysfunction) and in children with compensatory sounds. May have improving impact on intelligibility.
Treatment of VP insufficiency with protetics	Witt PD, Rozelle AA, Marsh JL, Marty-Grames L, Muntz HR, Gay WD & Pilgram TK (1995) Úroveň dôkazu IIb Golding-Kushner KJ, Cisneros G & LeBlanc E (1995) Sell D & Grunwell P (2001)	IIb IV IV	May be effective treatment

3 Recherche documentaire

La recherche documentaire a consisté à identifier les recommandations sur le diagnostic et la prise en charge de la maladie d'Alzheimer et des maladies apparentées publiées depuis 2000.

Bases de données bibliographiques interrogées :

- Medline (*National Library of Medicine*, États-Unis) ;
- Pascal (CNRS-INIST, France) ;
- BDSP (Banque de données en santé publique, Rennes).

Autres sources :

- *National Guideline Clearinghouse* (États-Unis) ;
- HTA Database (*International network of agencies for health technology assessment - INAHTA*) ;
- sociétés savantes compétentes dans le domaine étudié ;
- Internet : moteurs de recherche.

La stratégie d'interrogation de Medline est présentée dans le *tableau 2*.

Tableau 2. Stratégie de recherche documentaire

Type d'étude/sujet	Termes utilisés	Période de recherche	Nombre de références
Recommandations		2000-2007	108
Étape 1	Alzheimer Disease OR Alzheimer's OR Dementia		
ET			
Étape 2	Practice guideline* OR Guideline* OR Health planning guidelines OR Treatment guidelines OR Professional standards OR Recommendation* OR Consensus development conference OR Consensus development conference, NIH OR Consensus conference* OR Consensus statement		

Cinq recommandations récentes en langue anglaise et 8 documents français (recommandations, consensus, rapport) portant sur le thème ont été conservés.

Annexes

Annexe 1. Recommandations et travaux disponibles

Date de publication	Organisme(s)	Titre	Date de la recherche documentaire
2000 (3)	Agence nationale d'accréditation et d'évaluation en santé	Recommandations pratiques pour le diagnostic de la maladie d'Alzheimer	1989-1999
2001 (4)	American Academy of Neurology	Practice parameter: Diagnosis of dementia (an evidence-based review): Report of the Quality Standards Subcommittee of the American Academy of Neurology.	1989-1999 Il est précisé sur le site Internet de l'AAN que les informations sont encore valides en février 2007
2001 (10)	American Academy of Neurology	Practice parameter: Management of dementia (an evidence-based review): Report of the Quality Standards Subcommittee of the American Academy of Neurology	1989 - juillet 2000 Il est précisé sur le site Internet de l'AAN que les informations sont encore valides en février 2007
2003 (11)	Agence nationale d'accréditation et d'évaluation en santé	Prise en charge non médicamenteuse de la maladie d'Alzheimer et des troubles apparentés	1997-2002
2004 (13)	Direction générale de la santé, Direction générale de l'action sociale	Recommandations de bonnes pratiques de soins en EHPAD	Non applicable
2005 (8)	Société française de gériatrie et gérontologie	Consensus sur la démence de type Alzheimer au stade sévère	Dates non mentionnées
2005 (1)	Office parlementaire d'évaluation des politiques de santé	Rapport sur la maladie d'Alzheimer et les maladies apparentées	Dates non mentionnées
2006 (5)	Scottish Intercollegiate guidelines network	Management of patients with dementia. A national clinical guideline	1997-2004
2006 (National Collaborating Center for Mental Health, 2006 22 /id)	National Institute for Health and Clinical Excellence, Social Care Institute for excellence.	Dementia supporting people with dementia and their carers. National clinical practice guideline n°2	Dates non mentionnées, fin de recherche estimée d'après le texte : août 2006
2006 (12)	Centres mémoires, de ressources et de recherche de Nice et Toulouse, Société de psychogériatrie de langue française et Société française de gériatrie et gérontologie	Concertation professionnelle sur le traitement de l'agitation, de l'agressivité, de l'opposition et des troubles psychotiques dans les démences	Dates non mentionnées

Bibliographie

1. Office parlementaire d'évaluation des politiques de santé, Gallez C. Rapport sur la maladie d'Alzheimer et les maladies apparentées. Paris: Assemblée nationale ; Sénat; 2005.
2. Direction générale de la santé, France Alzheimer, Association francophone des droits de l'Homme âgé. Alzheimer : l'éthique en questions. Recommandations. Paris: Ministère de la santé et des solidarités; 2007.
3. Agence nationale d'accréditation et d'évaluation en santé. Recommandations pratiques pour le diagnostic de la maladie d'Alzheimer. Paris: Anaes; 2000.
4. American Academy of Neurology, Knopman DS, DeKosky ST, Cummings JL, Chui H, Corey-Bloom J, *et al.* Practice parameter: diagnosis of dementia (an evidence-based review). *Neurology* 2001;56(9):1143-53.
5. Scottish Intercollegiate guidelines network. Management of patients with dementia. A national clinical guideline. Edinburgh: SIGN; 2006.
6. National Institute for Health and Clinical Excellence. Social Care Institute for excellence. Dementia. Supporting people with dementia and their carers in health and social care. National clinical practice guideline n°42. London: NICE; 2006.
7. Waldemar G, Dubois B, Emre M, Georges J, McKeith IG, Rossor M, *et al.* Recommendations for the diagnosis and management of Alzheimer's disease and other disorders associated with dementia: EFNS guidelines. *Eur J Neurol* 2007;14(1):e1-28.
8. B. Vellas B, Gauthier S, Allain H, Andrieu S, Aquino JP, Berrut G, *et al.* Consensus sur la démence de type Alzheimer au stade sévère. *Rev Gériatr* 2005;30(9):627-40.
9. Institut national de la santé et de la recherche médicale. Maladie d'Alzheimer. Enjeux scientifiques, médicaux et sociétaux. Paris: INSERM; 2007.
10. American Academy of Neurology, Doody RS, Stevens JC, Beck C, Dubinsky RM, Kaye JA, *et al.* Practice parameter: management of dementia (an evidence-based review). *Neurology* 2001;56(9):1154-86.
11. Agence nationale d'accréditation et d'évaluation en santé. Prise en charge non médicamenteuse de la maladie d'Alzheimer et des troubles apparentés. Paris: Anaes; 2003.
12. Collège national des enseignants de gériatrie, Société française de gériatrie et gérontologie, Syndicat national de gérontologie clinique, Benoit M, Arbus C, Blanchard F, *et al.* Concertation professionnelle sur le traitement de l'agitation, de l'agressivité, de l'opposition et des troubles psychotiques dans les démences. *Rev Gériatr* 2006;31(9).
13. Direction générale de la santé, Direction générale de l'action sociale. Recommandations de bonnes pratiques de soins en EHPAD. Paris: DGS; DGAS; 2004.

Speech and language disorders in children

Guidelines

http://www.rcslt.org/speech_and_language_therapy/commissioning/sli_plus_intro

Royal College of Speech & Language Therapists - Resource Manual for Commissioning and Planning Services for SLCN / Specific Language Impairment (UK)

http://www.has-sante.fr/portail/jcms/c_271995/lorthophonie-dans-les-troubles-specifiques-du-developpement-du-langage-oral-chez-l-enfant-de-3-a-6-ans

SLT for Specific Language Impairment in children aged 3-6 (France)

<http://www.kaypahoito.fi/web/kh/suositukset/naytaartikkeli/tunnus/hoi50085>

Current Care Guideline of Specific Language Impairment in Children (Finland)

http://www.awmf.org/uploads/tx_szleitlinien/049-006l_S2k_Diagnostik_Sprachentwicklungsstoerungen_2011-12.pdf Developmental Phonological Disorder (Germany)

Source: American Speech and Hearing Association

Guidelines

1. Roles and Responsibilities of Speech-Language Pathologists in Early Intervention: Guidelines

<http://www.asha.org/docs/html/GL2008-00293.html>

2. Childhood Apraxia of Speech

<http://www.asha.org/docs/html/TR2007-00278.html>

3. Preferred Practice Patterns for the Profession of Speech-Language Pathology

<http://www.asha.org/docs/html/PP2004-00191.html#sec1.3.18>

Reviews

1. The Efficacy of Treatment for Children With Developmental Speech and Language Delay/Disorder: A Meta-Analysis
<http://jslhr.asha.org/cgi/content/abstract/47/4/924?maxtoshow=&hits=10&RESULTFORMAT=1&andorexacttitle=and&andorexacttitleabs=and&fulltext=speech+language+children+systematic+review&andorexactfulltext=and&searchid=1&FIRSTINDEX=0&sortspec=relevance&resourcetype=HWCIT>
2. Evidence-Based Systematic Review: Effects of Different Service Delivery Models on Communication Outcomes for Elementary School–Age Children
<http://lshss.asha.org/cgi/content/abstract/41/3/233>
3. Language Intervention Practices for School-Age Children With Spoken Language Disorders: A Systematic Review
<http://lshss.asha.org/cgi/content/abstract/39/1/S110>
4. Auditory Processing Disorders and Auditory/Language Interventions: An Evidence-Based Systematic Review
http://lshss.asha.org/cgi/content/abstract/0161-1461_2010_10-0013v1
5. Evidence-Based Vocabulary Instruction for Elementary Students Via Storybook Reading
<http://www.speechandlanguage.com/ebp/pdfs/1-3-oct-2006.pdf>
6. Screening for Speech and Language Delay in Preschool Children: Systematic Evidence Review for the US Preventive Services Task Force
<http://www.asha.org/members/reviews.aspx?id=7320>

Source: The Cochrane Collaboration

Reviews

1. **Speech and language therapy interventions for children with primary speech and language delay or disorder**
<http://onlinelibrary.wiley.com/o/cochrane/clsysrev/articles/CD004110/frame.html>
2. **Intervention for childhood apraxia of speech**
<http://onlinelibrary.wiley.com/o/cochrane/clsysrev/articles/CD006278/frame.html>

DYSPHAGIA – SWALLOWING DISORDERS

Guidelines

Scottish Intercollegiate Guidelines Network, SIGN Guideline 119: Management of Patients with Stroke: Identification and Management of Dysphagia: <http://www.sign.ac.uk/guidelines/fulltext/119/contents.html>

Leitlinien der Deutschen Gesellschaft für Neurologie, Neurogene Dysphagien: <http://www.uni-duesseldorf.de/AWMF/II/030-111.htm>,
<http://www.dgn.org/component/content/article/18-leitlinien/435-leitlinien-der-dgn-neurogene-dysphagien.html?q=dysphagie>

Royal College of Speech & Language Therapists - Resource Manual for Commissioning and Planning Services for SLCN / dysphagia
http://www.rcslt.org/speech_and_language_therapy/commissioning/dysphagia_plus_intro

AWMF (Germany)

http://www.awmf.org/uploads/tx_szleitlinien/039-033_S1_Dysphagie_11-2009_11-2014.pdf

ASHA: Swallowing Guidelines

<http://www.asha.org/members/compendiumSearchResults.aspx?type=0&searchtext=Swallowing%20Disorders>

World Gastroenterology Organisation Practice Guidelines:

http://www.worldgastroenterology.org/assets/downloads/en/pdf/guidelines/08_dysphagia.pdf

NGC National Guidelines Clearinghouse:

ACR Appropriateness Criteria® dysphagia: <http://www.guidelines.gov/content.aspx?id=13625&search=dysphagia>

Cough and aspiration of food and liquids due to oral-pharyngeal dysphagia: ACCP evidence-based clinical practice guidelines:
<http://www.guidelines.gov/content.aspx?id=8664&search=dysphagia>

Selected topics in stroke management. Dysphagia assessment. In: Canadian best practice recommendations for stroke care.
<http://www.guidelines.gov/content.aspx?id=14195&search=dysphagia>

Guidelines for the Management of the Adult Dysphagic Patient – Federazione Logopedisti Italiani

http://www.alplogopedia.it/documentazione_alp/LGDisfagia.pdf

CARE1st, Healthplan Arizona: <https://www.care1st.com/az/providers/preventivehealth.asp>

Systematic reviews, studies

ASHA: Systematic reviews:

<http://www.asha.org/members/compendiumSearchResults.aspx?type=1&searchtext=Swallowing%20Disorders>

Evidence-based systematic review: Oropharyngeal dysphagia behavioral treatments. Part I-Background and methodology:

http://findarticles.com/p/articles/mi_7626/is_200902/ai_n32331416/?tag=content;col1

Evidence-based systematic review: Oropharyngeal dysphagia behavioral treatments. Part II-Impact of dysphagia treatment on normal swallow function: http://findarticles.com/p/articles/mi_7626/is_200902/ai_n32331417/?tag=content;col1

Evidence-based systematic review: Oropharyngeal dysphagia behavioral treatments. Part III-Impact of dysphagia treatments on populations with neurological disorders: http://findarticles.com/p/articles/mi_7626/is_200902/ai_n32331411/?tag=content;col1

Evidence-based systematic review: Oropharyngeal dysphagia behavioral treatments. Part IV-Impact of dysphagia treatment on individuals' postcancer treatments: http://findarticles.com/p/articles/mi_7626/is_200902/ai_n32331414/?tag=content;col1

Evidence-based systematic review: Oropharyngeal dysphagia behavioral treatments. Part V-Applications for clinicians and researchers: http://findarticles.com/p/articles/mi_7626/is_200902/ai_n32331418/?tag=content;col1

Treatment for swallowing difficulties (dysphagia) in chronic muscle disease: <http://www2.cochrane.org/reviews/en/ab004303.html>

Interventions for dysphagia in oesophageal cancer: <http://www2.cochrane.org/reviews/en/ab005048.html>

Improving care for patients with dysphagia: <http://www.ncbi.nlm.nih.gov/pubmed/16267184>

Promoting research use in speech and language therapy: a cluster randomized controlled trial to compare the clinical effectiveness and costs of two training strategies: <http://www.ncbi.nlm.nih.gov/pubmed/15929507>

Policy documents

ASHA's Compendium of Systematic Reviews:
<http://www.asha.org/slp/clinical/dysphagia/>

Interesting Websites, Journals:

www.dysphagiaresearch.org

Springer Verlag: Dysphagia: <http://www.springerlink.com/content/100357/>

FLUENCY DISORDERS (STUTTERING AND CLUTTERING)

Guidelines

1. American Speech and Hearing Association

<http://www.asha.org/docs/html/GL1995-00048.html>

They are guidelines for practice in stuttering treatment but are not official standards of the ASHA. They were developed by members of the Steering Committee of ASHA's Special Interest Division on Fluency and Fluency Disorders (Division 4)

2. Royal College of Speech & Language Therapists - Resource Manual for Commissioning and Planning Services for SLCN / fluency

http://www.rcslt.org/speech_and_language_therapy/commissioning/fluency_plus_intro

3. Evidence-Based Practice in Fluency Disorders, Kully, D., Langevin, M. (2005)

<http://www.asha.org/Publications/leader/2005/051018/f051018b.htm>

Metanalysis

1. Effectiveness of Behavioral Stuttering Treatment: A Systematic Review and Meta-Analysis

Herder, C., Howard, C., et al. (2006).

Contemporary Issues in Communication Science and Disorders, 33, 61-73

<http://www.asha.org/Members/ebp/compendium/reviews/Effectiveness-of-Behavioral-Stuttering-Treatment--A-Systematic-Review-and-Meta-Analysis.htm>

2. Meta-Analysis of the Effects of Stuttering Treatment

Andrews G. , Guitar B., Howie, P. (1980)

Journal of Speech and Hearing Disorders , 45, 287-307

<http://jshd.asha.org/cgi/content/abstract/45/3/287>

Systematic reviews

1. Stuttering Treatment Research 1970-2005: II. Systematic Review Incorporating Trial Quality Assessment of Pharmacological Approaches

Bothe, A. K., Davidow, J. H., et al. (2006).

American Journal of Speech-Language Pathology, 15(4), 342-352

<http://www.asha.org/Members/ebp/compendium/reviews/Stuttering-Treatment-Research-1970-2005--II--Systematic-Review-Incorporating-Trial-Quality-Asse---.htm>

2. The Stuttering Treatment Research Evaluation and Assessment Tool (STREAT): Evaluating Treatment Research as Part of Evidence-Based Practice

Jason H. Davidow, Anne K. Bothe, Robin E. Bramlett (2006)

American Journal of Speech-Language Pathology, 15 126-141

<http://ajslp.asha.org/cgi/content/abstract/15/2/126>

3. Problem Formulation in Evidence-based Practice and Systematic Reviews

Schlosser, R. W., O'Neil-Pirozzi, T. M. (2006)

Contemporary Issues in Communication Science and Disorders, 33, 5-10

<http://www.nsslha.org/uploadedFiles/NSSLHA/publications/cicsd/2006SProblemFormulationinEBP.pdf#search=%22stuttering%22>

4. Grading Study Quality in Systematic Reviews

Law, J., Plunkett, C. (2006)

Contemporary Issues in Communication Science and Disorders, 33, 28-36

<http://www.nsslha.org/uploadedFiles/NSSLHA/publications/cicsd/2006SGradingStudyQuality.pdf#search=%22stuttering%22>

5. Evidence – based treatment of stuttering: I Definition and application

Ingham, J. C. *Journal of Fluency Disorders*, Vo 28 (3), 2003, p. 197-207

http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6T8H-48W8VPG-1&_user=10&_coverDate=12%2F31%2F2003&_alid=1510546654&_rdoc=1&_fmt=high&_orig=search&_origin=search&_zone=rslt_list_it_em&_cdi=5087&_sort=r&_st=13&_docanchor=&_view=c&_ct=112&_acct=C000050221&_version=1&_urlVersion=0&_userid=10&md5=131fc2f1625be7a189939b54b8a6707c&searchtype=a

6. Evidence – based treatment of stuttering: V. The art of clinical practice and the muture of clinical reserch.

Bothe, A. K. *Journal of Fluency Disorders*, Vo 28 (3), 2003, p. 247-258

http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6T8H-48WPVKY-1&_user=10&_coverDate=12%2F31%2F2003&_alid=1510546654&_rdoc=2&_fmt=high&_orig=search&_origin=search&_zone=rslt_list_it_em&_cdi=5087&_sort=r&_st=13&_docanchor=&_view=c&_ct=112&_acct=C000050221&_version=1&_urlVersion=0&_userid=10&md5=496f31c9007cc06c94c78139eaef4735&searchtype=a

7. Evidence –based practice in stuttering: Some questions to consider.

N. Bernstein Ratner, *Journal of Fluency Disorders*, Vo 30 (3), 2005, p. 163-188

http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6T8H-4GD4S8X-1&_user=10&_coverDate=12%2F31%2F2005&_alid=1510546654&_rdoc=3&_fmt=high&_orig=search&_origin=search&_zone=rslt_list_it_em&_cdi=5087&_sort=r&_st=13&_docanchor=&_view=c&_ct=112&_acct=C000050221&_version=1&_urlVersion=0&_userid=10&md5=6e119e4fb36caa8115f5adb221417483&searchtype=a

HEARING IMPAIRMENT

Guidelines

<http://aappolicy.aappublications.org/cgi/content/full/pediatrics;111/2/436>

Hearing assessment in infants and children: recommendations beyond neonatal screening.

<http://www.ok.gov/health/documents/He-mescrn.pdf>

Guideline Hearing and Middle-Ear Screening

http://www.audiologyonline.com/articles/article_detail.asp?article_id=1716

Guideline for audiologic management of the adult patient

http://www.who.int/pbd/deafness/en/hearing_aid_guide_en.pdf

Guidelines for Hearing Aids and Services for Developing Countries

http://www.nl.cochlear.be/PDFs/5_Rehab_Reader_de_Rave_N32749F_EN.pdf

Auditory Rehabilitation Therapy Guidelines for Optimizing the Benefits of Binaural Hearing

<http://www.batod.org.uk/index.php?id=/articles/guidelines/speechandlang.htm>

Guidelines for Co-operation between Teachers of the Deaf and Speech and Language Therapists

<http://www.asha.org/docs/pdf/GL2004-00002.pdf>

<http://www.asha.org/NR/rdonlyres/OBB7C840-27D2-4DC6-861B1709ADD78BAF/0/v2GLAudAssessChild.pdf>

ASHA Guidelines for the audiologic assessment of children from birth to 5 years of age

<http://www.audiology.org/resources/documentlibrary/Documents/CAPD%20Guidelines%208-2010.pdf>

Guidelines for the Diagnosis, Treatment and Management of Children and Adults with Central Auditory Processing Disorder

http://www.awmf.org/uploads/tx_szleitlinien/049-010_S2e_Periphere_Hoerstoerungen_im_Kindesalter_lang_02-2005_12-2009_in_UEbearbeitung.pdf

Peripheral hearing loss /disorder in children(S2)- AWMF (Germany)

<http://www.asha.org/docs/pdf/GL2005-00023.pdf>

ASHA Guidelines for addressing acoustics in educational settings

[Surdité de l'enfant : accompagnement des familles et suivi de l'enfant de 0 à 6 ans, hors accompagnement scolaire](#)

Haute Autorité de Santé - Ces recommandations concernent les enfants, et leur famille, qui présentent une surdité bilatérale permanente, et dont le seuil auditif > 40 dB HL peut entraîner des retards importants de développement du langage si l'environnement de l'enfant n'est pas très précocement adapté à ses besoins particuliers.

[Le traitement de la surdité par implants cochléaires ou du tronc cérébral](#)

Haute Autorité de Santé - Les implants cochléaires et ceux du tronc cérébral sont destinés à traiter des surdités de perception bilatérales. Ce sont des dispositifs de réhabilitation auditive destinés à permettre la restauration ou le développement de la communication orale. Une évaluation de la HAS a précisé les indications de ces techniques et leur place dans la stratégie thérapeutique des surdités pour faciliter la modification de leur financement.

SPECIFIC LEARNING DISORDERS

Guidelines

1. [Roles and Responsibilities of Speech-Language Pathologists with Respect to Reading and Writing in Children and Adolescents \[Guidelines\] \(2001\)](#)

ASHA Ad Hoc Committee on Reading and Written Language Disorders

2. [Assisting Students Struggling with Reading: Response to Intervention and Multi-Tier Intervention in the Primary Grades. A Practice Guide. \(NCEE 2009-4045\)](#)

Gersten, R., Compton, D., Connor, C. M., Dimino, J., Santoro, L., Linan-Thompson, S., & Tilly, W. D. (2008).

Washington (DC): National Center for Education Evaluation and Regional Assistance, Institute of Education Sciences, U.S. Department of Education.

This evidence-based and consensus-based guideline provides recommendations to assist educators in implementing effective interventions to promote reading achievement in children.

3. [\[Indications for orthophony therapy in written language disorders in children. Work Group assembled by the National Agency for Health Accreditation and Evaluation \(ANAES\)\]](#)

Pouymayou C, David L.

Ann Otolaryngol Chir Cervicofac. 1998 Oct;115 Suppl 1:S75-88. French.

4. [Practice parameters for the assessment and treatment of children and adolescents with language and learning disorders. AACAP.](#)

[No authors listed]

J Am Acad Child Adolesc Psychiatry. 1998 Oct;37(10 Suppl):46S-62S.

PMID: 9785728 [PubMed - indexed for MEDLINE]

5. [Richtlijn Multidisciplinaire samenwerking bij diagnostiek en behandeling van ernstige dyslexie bij kinderen en jeugdigen](#)

NVLF guideline multidisciplinary care in diagnosing and treating dyslexia in children

6. http://www.alplogopedia.it/documentazione_alp/dsa_raccomandazioni.pdf

FLI Recommendations for the Clinical Practice in the Specific Learning Disabilities (2006)

Metanalyses

1. [Meta-Analysis of the Nonword Reading Deficit in Specific Reading Disorder](#)
Herrmann, J. A., Matyas, T., et al. (2006).
Dyslexia, 12(3), 195-221.
Meta-analysis of 34 studies examining specific reading disorder (SRD) groups.
2. [Reading research for students with LD: a meta-analysis of intervention outcomes.](#)
Swanson HL.
J Learn Disabil. 1999 Nov-Dec;32(6):504-32.
PMID: 15510440 [PubMed - indexed for MEDLINE]
3. [Handedness and dyslexia: a meta-analysis.](#)
Eglinton E, Annett M.
Percept Mot Skills. 1994 Dec;79(3 Pt 2):1611-6.
PMID: 7870554 [PubMed - indexed for MEDLINE]
4. Ehri, L. C., Nunes, S. R., Willows, D. M., Schuster, B.V., Yaghoub-Zadeh, Z., & Shanahan, T. (2001). Phonemic awareness instruction helps children learn to read: Evidence from the National Reading Panel's meta-analysis. *Reading Research Quarterly*, 36, 250–287.

Systematic Reviews

1. [The Use of Phonics in the Teaching of Reading and Spelling.](#)
Brooks, G., & Torgerson, C. J. (2008).
EBP Briefs, 3(2), 1-12 (electronic publication)
This is a systematic review of randomized controlled trials which address the effectiveness of phonics instruction to improve childrens' reading accuracy, comprehension, and/or spelling.
2. [Predicting Reading Abilities from Oral Language Skills: A Critical Review of the Literature](#)
Ekins, E., & Schneider, P. (2006).
Journal of Speech-Language Pathology & Audiology, 30(1), 26-45.

Systematic review of longitudinal studies that used correlational or regression designs and included at least one measure of oral language as a predictor

3. Phonological awareness intervention: beyond the basics. [Schuele CM](#), [Boudreau D](#). *Lang Speech Hear Serv Sch*. 2008 Jan;39(1):3-20.
4. Early precursors and enabling skills of reading acquisition. [Lundberg I](#). *Scand J Psychol*. 2009 Dec;50(6):611-6.
5. *Reach Out and Read: evidence based approach to promoting early child development*. [Zuckerman B](#), [Khandekar A](#). *Curr Opin Pediatr*. 2010 Aug;22(4):539-44. *Review*.
6. A Synthesis of Spelling and Reading Interventions and Their Effects on the Spelling Outcomes of Students With LD. [Wanzek J](#), [Vaughn S](#), [Wexler J](#), [Swanson EA](#), [Edmonds M](#), [Kim AH](#). *Journal of Learning Disabilities* 2006 39 (6): 528-43
7. A synthesis of research on effective interventions for building reading fluency with elementary students with learning disabilities. [Chard DJ](#), [Vaughn S](#), [Tyler BJ](#). *Journal of Learning Disabilities* 2002 35 (5) :386-406

EVIDENCE BASED PRACTICE RESOURCES

- [Evidence-based practice, response to intervention, and the prevention of reading difficulties](#).
[Justice LM](#). *Lang Speech Hear Serv Sch*. 2006 Oct;37(4):284-97.
- [Interventions aimed at improving reading success: an evidence-based approach](#).
[Foorman BR](#), [Breier JI](#), [Fletcher JM](#). *Dev Neuropsychol*. 2003;24(2-3):613-39.

Annex 1

A Note on Terminology

Evidence in Health and Social Care www.evidence.nhs.uk - NHS Evidence - learning disabilities

Some confusion can arise from the use of different terms in different parts of the world, and a changing terminology over time, reflecting a growing empowerment of the people described.

This site uses the term Learning Disability, but you may also find in the resources listed here, the terms Intellectual Disability, Learning Difficulties, Developmental Disabilities, and in older and often US based resources, Mental Retardation.

- Intellectual disability has been adopted by the World Health Organisation (WHO)
- Developmental disabilities is found mainly in the US, although this can sometimes refer to a wider group, including people with acquired brain injury, or cerebral palsy.
- Learning Difficulties is a term preferred by many people described by the labelling process, and will be found in many UK publications, although in the USA it can often refer to specific learning difficulties such as dyslexia.
- Mental Retardation, although outmoded may appear in some texts in the United States, particularly older texts.

One further confusion relates to the use of the term 'learning disability' in the United States when referring to children. LDOnline (<http://www.ldonline.org/>), a major information resource in the USA defines Learning Disability in children as a neurological disorder, creating difficulties in reading, writing, spelling, reasoning, recalling and/or organizing information, but suggests that learning disabilities as they define them, "should not be confused with other disabilities such as mental retardation, autism, deafness, blindness, and behavioral disorders. None of these conditions are learning disabilities." (viewed 17.07.06)

The note above shows some of the difficulties of definition when attempting to labelling groups of individuals whose differences will often be far more significant than their similarities. There is a need for some form of definition and understanding of terms for the purposes of bringing together information resources such as found on the Learning Disability Specialist Library of the National Library for Health.

MOTOR SPEECH DISORDERS

Source	Authors	Type of evidence	Objectives	Findings
Speech therapy for children with dysarthria acquired before three years of age	Lindsay Pennington, Nick Miller, Sheila Robson January 2010	Cochrane Intervention Review www.thecochranelibrary.com	To assess whether direct intervention for improving the speech of children with dysarthria is more effective than no intervention To assess whether individual types of intervention are more effective than others in improving speech intelligibility of children with dysarthria.	No firm evidence of the effectiveness of speech and language therapy to improve the speech of children with early acquired dysarthria. No change in practice is warranted at the present time. Rigorous research is needed to investigate if the positive changes in children's speech observed in small descriptive studies are shown in randomised controlled trials. Research should examine change in children's speech production and intelligibility. It should also investigate the secondary education, health and social care outcomes of intervention, along with the cost and acceptability of interventions.
Intervention for childhood apraxia of speech	Angela T Morgan, Adam P Vogel Oct 2009	Cochrane Intervention Review	To assess the efficacy of intervention delivered by Speech and Language Therapists targeting CAS in children and adolescents.	A critical lack of well controlled treatment studies addressing treatment efficacy for CAS. Impossible for conclusions to be drawn about which interventions are most effective for treating CAS in children or adolescents.
Speech and language therapy interventions for children with	James Law, Zoe Garrett, Chad Nye May 2010	Cochrane Intervention Review	To examine the effectiveness of speech and language interventions for children with	Overall there is a positive effect of speech and language therapy interventions for children with

<p>primary speech and language delay or disorder</p>			<p>primary speech and language delay/disorder.</p>	<p>expressive phonological and expressive vocabulary difficulties. The evidence for expressive syntax difficulties is more mixed, and there is a need for further research to investigate intervention for receptive language difficulties. There is a large degree of heterogeneity in the results, and the sources of this need to be investigated.</p>
<p>Intervention for dysarthria associated with acquired brain injury in children and adolescents</p>	<p>Angela T Morgan, Adam P Vogel July 2008</p>	<p>Cochrane Intervention Review</p>	<p>To assess the efficacy of intervention delivered by Speech and Language Therapists targeting dysarthric speech in children resulting from acquired brain injury.</p>	<p>Critical lack of studies, let alone RCTs, addressing treatment efficacy for dysarthria in children with ABI. Efforts should first be directed at modest well-controlled studies to identify likely efficacious treatments that may then be trialed in multi-centre collaborations using quasi-randomised or RCT methods</p>
<p>Speech and language therapy versus placebo or no intervention for dysarthria in Parkinson's disease</p>	<p>Katherine Deane, Renata Whurr, E Diane Playford, Yoav Ben-Shlomo, Carl E Clarke June 2010</p>	<p>Cochrane Intervention Review</p>	<p>To compare the efficacy of speech and language therapy versus placebo or no interventions in patients with Parkinson's disease</p>	<p>Considering the flaws in the studies' methods, the small number of patients examined, and the possibility that studies with a negative result were not published (publication bias), there is insufficient evidence to prove or disprove the benefit of speech and language therapy for the treatment of speech disorders in people with Parkinson's disease. However this lack of evidence does not mean lack</p>

				of effect. A large well designed placebo-controlled randomised trial is needed to assess the effectiveness of speech and language therapy for speech disorders in Parkinson's disease. Patients should be followed for at least 6 months and outcome measures should be relevant. A survey of therapists is needed to determine what intervention methods are currently being used to treat Parkinsonian dysarthria, and whether there is a consensus as to 'best-practice'.
Speech and language therapy for dysarthria in Parkinson's disease: a comparison of techniques	Katherine Deane, Renata Whurr, E Diane Playford, Yoav Ben-Shlomo, Carl E Clarke January 2009	Cochrane Intervention Review	To compare the efficacy and effectiveness of novel S< techniques versus standard S< to treat dysarthria in patients with Parkinson's disease. To compare the efficacy and effectiveness of one S< technique versus a second form of S< to treat Parkinsonian dysarthria..	Insufficient evidence to support the use of one form of speech and language therapy over another for treatment of dysarthria in Parkinson's disease
Interventions for apraxia of speech following stroke	Carolyn West, Anne Hesketh, Andy Vail, Audrey Bowen Jan 2009	Cochrane Intervention Review	To assess whether therapeutic interventions improve functional speech in stroke patients with apraxia of speech and which individual therapeutic interventions are	There is no evidence from randomised trials to support or refute the effectiveness of therapeutic interventions for apraxia of speech. There is a need for high quality randomised trials to

			effective.	be undertaken in this area.
Speech and language therapy for dysarthria due to non-progressive brain damage	Cameron Sellars, Thomas Hughes, Peter Langhorne Jan 2009	Cochrane Intervention review	To investigate the efficacy of speech and language therapy interventions for adults with dysarthria caused by non-progressive brain damage	No evidence of the quality required by this review to support or refute the effectiveness of speech and language therapy interventions for dysarthria following non-progressive brain damage.
Evidence for effectiveness of treatment of loudness, rate, or prosody in dysarthria	Yorkston K M, Hakel M, Beukelman D R,(2007) Fager S. Journal of Medical Speech-Language Pathology, 15(2), xi-xxxvi.	Cochrane Intervention Review	The review assessed interventions for global aspects of speech in individuals with dysarthria.	Limited evidence of efficacy, with the exception of modification of loudness in individuals with Parkinson's disease hypokinetic dysarthria, for which there was some evidence of effectiveness. The review methodology and results were poorly reported and the reliability of the conclusion cannot be determined.
Speech supplementation techniques for dysarthria: a systematic review	Hanson E K, Yorkston K M, Beukelman D R.	Cochrane Intervention Review	To assess the effects of speech supplementation techniques on dysarthric speech.	Speech supplementation may help speakers with any type of severe or profound dysarthria, but more research is required. The evidence was based on small studies of unknown quality in a variety of patients, hence any conclusions are suggestive rather than definitive.
Botulinum toxin injections for the treatment of spasmodic dysphonia	Watts Christopher, Whurr Renata, Nye Chad	Cochrane Intervention Review	To determine the effectiveness of botulinum toxin for treating spasmodic dysphonia	Firm conclusions can not be drawn about the effectiveness of botulinum toxin for all types of spasmodic dysphonia, or for

				patients with different behavioural or clinical characteristics.
Evidence-Based Practice Guidelines for Dysarthria: Management of Velopharyngeal Function	Yorkston, K. M., Spencer, K., et al. (2001). Journal of Medical Speech-Language Pathology, (9)4, 257-274.	ANCDS Practice Guidelines www.ancds.org	To develop evidence based practice guidelines for management of velopharyngeal dysfunction in dysarthria	Consensus-based recommendations are made about behavioral interventions. Techniques focusing on nonspeech movements of the velopharyngeal mechanism are not recommended based on existing evidence and expert opinion. Palatal lift intervention was found to be effective in selected individuals with dysarthria.
Practice Guidelines for Dysarthria: Evidence for the Behavioral Management of the Respiratory/Phonatory System	Spencer, K. A., Yorkston, K. M., et al. (2006). Academy of Neurologic Communication Disorders and Sciences, Technical Report No. 3,.	ANCDS Practice Guidelines	To develop evidence-based guidelines for treatment of respiratory/phonatory dysfunction for individuals with dysarthria.	The behavioral management of respiratory/phonatory impairment has support from the research literature, particularly in the areas of biofeedback and intensive phonatory treatment ([Lee Silverman Voice Treatment])
Medical Interventions for Spasmodic Dysphonia & Some Related Conditions: A Systematic review	Yorkston, K. M., Spencer, K., et al	ANCDS Practice Guidelines	To develop evidence-based guidelines for medical management of spasmodic dysphonia.	Recurrent laryngeal nerve section and Botox injection as treatments for adductor SD result in a substantial degree of improvement for a substantial percentage of patients, but recurrence of SD signs and symptoms is common. The effectiveness of Botox injection for abductor SD is less pronounced. Evidence for other surgical

				techniques is limited.
Speech Supplementation Techniques for Dysarthria: A Systematic Review	Yorkston, K. M., Spencer, K., et al	ANCDS Practice Guidelines	To assess the effects of speech supplementation techniques on dysarthric speech.	Speech supplementation may help speakers with any type of severe or profound dysarthria, but more research is required. The evidence was based on small studies of unknown quality in a variety of patients, hence any conclusions are suggestive rather than definitive.
Treatment Guidelines for Acquired Apraxia of Speech: A Synthesis and Evaluation of the Evidence.	Wambaugh, J., Duffy, J., McNeil, M., Robin, D., Rogers, M., 2006 Journal of Medical Speech-Language Pathology. Volume 14, Number 2,	ANCDS Practice Guidelines	To review and evaluate the evidence for management of apraxia of speech	59 publications that met inclusion criteria were reviewed in terms of 33 variables pertaining to issues such as subject, treatment, and outcome descriptions, and scientific adequacy. Although the review revealed many weaknesses in the evidence base, findings indicated that patients with AOS can benefit from treatment.

<p>Treatment Guidelines for Acquired Apraxia of Speech: Treatment Descriptions and Recommendations.</p>	<p>Wambaugh, J., Duffy, J., McNeil, M., Robin, D., Rogers, M., 2006 Journal of Medical Speech-Language Pathology. Volume 14, Number 2,</p>	<p>ANCDS Practice Guidelines</p>	<p>To develop evidence-based treatment guidelines for apraxia of speech</p>	<p>The major categories of AOS treatments are described in terms of treatment techniques, targets, outcomes, candidacy, and evidence quality. In addition, this report provides treatment recommendations and suggestions for future research.</p>
<p>Methods of Speech Therapy Treatment for Stable Dysarthria: A Review</p>	<p>Palmer, R., & Enderby, P. (2007). Advances in Speech Language Pathology, 9(2), 140-153.</p>	<p>Systematic Review</p>	<p>This is a systematic review of primary research studies investigating the effectiveness of dysphagia interventions in individuals with stable dysphagia diagnoses (such as resulting from stroke, TBI, or cerebral palsy)</p>	<p>Whilst some techniques have been studied more than others, all techniques require more small exploratory trials in preparation for randomized controlled trials which will offer clinicians information on the effectiveness of dysarthria treatment techniques</p>
<p>Treatment of Dysarthria: Evidence-Based Practice</p>	<p>A Collaborative Project of: ASHA Professional Development & Special Interest Division 2, Neurophysiology and Neurogenic Speech and Language Disorders</p>	<p>Programme</p>	<p>Experienced clinician-researchers discuss the evidence base for four approaches to dysarthria intervention: treatment of respiratory/phonatory deficits, treatment of rate control, nonspeech oral motor training, and augmentative and alternative communication.</p>	<p>Learning Outcomes You will be able to: 1) describe the main features of the treatments for respiratory/phonatory dysfunction from dysarthria discussed by Spencer and Yorkston 2) describe the main features of the treatments for management of speaking rate in dysarthria discussed by Hammen 3) describe the main features of the oral motor treatment approaches discussed by Hodge 4) describe the main features of augmentative and alternative communication</p>

				interventions discussed by Mathy
RCSLT Clinical Guidelines: 5.11 Dysarthria	Taylor-Goh, S., ed. (2005). <i>RCSLT Clinical Guidelines. Bicester, Speechmark Publishing Ltd.</i>	Clinical Guideline http://www.rcslt.org/members/publications/RCSLT_Clinical_Guidelines.pdf	This evidence-based guideline provides recommendations for the assessment and management of dysarthria in children and adults. This guideline is intended for primary use by speech-language pathologists.	Evidence based recommendations on speech screening/ assessment and speech treatment
Clinical Practice Guideline: Report of the Recommendations. Motor Disorders, Assessment and Intervention for Young Children (Age 0–3 Years)	New York State Department of Health, Early Intervention Program. (2006). <i>Albany (NY): NYS Department of Health, Publication No. 4962, 322 pages.</i>	Clinical Guideline http://www.nyhealth.gov	This evidence-based and consensus-based guideline provides recommendations regarding assessment and intervention for young children with motor disorders. The target audiences for this guideline are parents and professionals.	Recommendations specific to speech-language pathology are included in sections addressing oral-motor assessment, communication and cognition assessment, oral-motor intervention, and augmentative and alternative communication.

 [Monodisciplinaire richtlijn Parkinson](#) NVLF Monodisciplinary guideline Parkinson

 http://www.rcslt.org/speech_and_language_therapy/commissioning/dysarthria_plus_intro

Royal College of Speech & Language Therapists - Resource Manual for Commissioning and Planning Services for SLCN / dysarthria

[http://www.awmf.org/uploads/tx_szleitlinien/030-103_S1_Sprech- und Stimmstoerungen_neurogene_Therapie_Dysarthrie - Dysarthrophonie_10-2008_10-2013.pdf](http://www.awmf.org/uploads/tx_szleitlinien/030-103_S1_Sprech-_und_Stimmstoerungen_neurogene_Therapie_Dysarthrie_-_Dysarthrophonie_10-2008_10-2013.pdf) AWMF - Germany

Guidelines Voice Disorders

1. Meta-analyses

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2. Reviews

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JOURNALS* RELEVANT TO SPEECH-LANGUAGE PATHOLOGISTS

<i>Journal title</i>	<i>Abbreviated title</i>	<i>URL</i>
• American Annals of the Deaf	Am Ann Deaf	gupress.gallaudet.edu/annals
• American Journal of Audiology	Am J Audiol	aja.asha.org
• American Journal of Speech-Language Pathology	Am J Speech Lang Pathol	ajslp.asha.org
• The Analysis of Verbal Behavior	Anal Verbal Behav	www.abainternational.org/TAVB.asp
• Annals of Dyslexia	Ann Dyslexia	www.springer.com/education+%26+language/linguistics/journal/11881
• Annual Review of Applied Linguistics	Annu Rev Appl Linguist	journals.cambridge.org/action/displayJournal?jid=APL
• Aphasiology	Aphasiology	www.tandf.co.uk/journals/titles/02687038.asp
• Applied Acoustics	Appl Acoust	www.elsevier.com/wps/find/journaldescription.agents/405890/description#description
• Applied Linguistics	Appl Linguist	aplij.oxfordjournals.org
• Applied Psycholinguistics	Appl Psycholinguist	journals.cambridge.org/action/displayJournal?jid=APS
• Applied Psychophysiology and Biofeedback	Appl Psychophysiol Biofeedback	www.springer.com/psychology/journal/10484
• Asia Pacific Journal of Speech, Language, and Hearing	Asia Pac J Speech Lang Hear	www.pluralpublishing.com/journals_APJ.htm
• Audiology & Neuro-Otology	Audiol Neurootol	content.karger.com/ProdukteDB/produkte.asp?Aktion=JournalHome&ProduktNr=224213
• Augmentative and Alternative Communication	Augment Altern Commun	www.isaac-online.org/en/publications/aac.html
• Bilingualism: Language and Cognition	Biling Lang Cogn	journals.cambridge.org/action/displayJournal?jid=BIL

• Brain and Cognition	Brain Cogn	www.elsevier.com/wps/find/journaldescription.cws_home/622798/description
• Brain and Language	Brain Lang	www.elsevier.com/wps/find/journaldescription.cws_home/622799/description#description
• Child Development	Child Dev	www.wiley.com/bw/journal.asp?ref=0009-3920&site=1
• Child Language Teaching and Therapy	Child Lang Teach Ther	clt.sagepub.com
• Cleft Palate-Craniofacial Journal	Cleft Palate Craniofac J	www.cpcjournal.org
• Clinical Linguistics & Phonetics	Clin Linguist Phon	informahealthcare.com/journal/clp
• Cochlear Implants International	Cochlear Implants Int	onlinelibrary.wiley.com/journal/10.1002/(ISSN)1556-9152
• Communication Disorders Quaterly	Commun Disord Q	cdq.sagepub.com
• Communication Research	Communic Res	crx.sagepub.com
• Communicative Disorders Review	Commun Disord Rev	www.pluralpublishing.com/journals_CDR.htm
• Computer Assisted Language Learning	Comput Assist Lang Learn	www.tandf.co.uk/journals/titles/09588221.asp
• Deafness and Education International	Deaf Educ Int	onlinelibrary.wiley.com/journal/10.1002/(ISSN)1557-069X
• Dyslexia	Dyslexia	eu.wiley.com/WileyCDA/WileyTitle/productCd-DYS.html
• Dysphagia	Dysphagia	www.springer.com/medicine/otorhinolaryngology/journal/455
• Ear and Hearing	Ear Hear	journals.lww.com/ear-hearing/pages/default.aspx
• Early Childhood Services	Early Child Serv	www.pluralpublishing.com/journals_ECS.htm
• Eating Disorders	Eat Disord	www.tandf.co.uk/journals/pp/10640266.html
• European Eating Disorders Review	Eur Eat Disord Rev	onlinelibrary.wiley.com/journal/10.1002/(ISSN)1099-0968
• Evidence Based Communication Assessment and Intervention	Evid Based Commun Assess Interv	www.informaworld.com/smpp/title~content=t744398443~db=all
• First Language	First Lang	fla.sagepub.com
• Folia Phoniatica et Logopaedica	Folia Phoniatr Logop	www.online.karger.com/journals/fpl

• Glossa (la revue scientifique de référence en orthophonie)	Glossa	www.glossa.fr
• Glossa (an ambilingual interdisciplinary journal)	Glossa	bibliotecavirtualut.suagm.edu/Glossa2/index.html
• Hearing Journal	Hear J	journals.lww.com/thehearingjournal/pages/default.aspx
• Hearing Research	Hear Res	www.elsevier.com/wps/find/journaldescription.cws_home/506060/description#description
• Human Communication Research	Hum Commun Res	www.wiley.com/bw/journal.asp?ref=0360-3989
• International Journal of Audiology	Int J Audiol	www.internationaljournalofaudiology.com
• International Journal of Bilingual Education and Bilingualism	Int J Biling Educ Biling	www.tandf.co.uk/journals/1367-0050
• International Journal of Bilingualism	Int J Biling	ijb.sagepub.com
• International Journal of Eating Disorders	Int J Eat Disord	onlinelibrary.wiley.com/journal/10.1002/(ISSN)1098-108X
• International Journal of Language & Communication Disorders	Int J Lang Commun Disord	informahealthcare.com/journal/lcd
• International Journal of Speech-Language Pathology	Int J Speech Lang Pathol	informahealthcare.com/journal/asl
• International Tinnitus Journal	Int Tinnitus J	www.tinnitusjournal.com
• Journal of the Academy of Rehabilitative Audiology	J Acad Rehabil Audiol	www.audrehab.org/jara.htm
• Journal of the Acoustical Society of America	J Acoust Soc Am	asa.aip.org/jasa.html
• Journal of the American Academy of Audiology	J Am Acad Audiol	www.audiology.org/resources/journal/Pages/default.aspx
• Journal of Applied Communication Research	J Appl Commun Res	www.tandf.co.uk/journals/rjac
• Journal of Auditory Research	J Aud Res	/
• Journal of Child Language	J Child Lang	journals.cambridge.org/action/displayJournal?jid=JCL
• Journal of Communication Disorders	J Commun Disord	www.elsevier.com/wps/find/journaldescription.cws_home/506060/description#description

• Journal of Deaf Studies and Deaf Education	J Deaf Stud Deaf Educ	jdsde.oxfordjournals.org
• Journal of Fluency Disorders	J Fluency Disord	www.elsevier.com/wps/find/journaldescription.cws_home/505771/description#description
• Journal of Phonetics	J Phon	www.elsevier.com/wps/find/journaldescription.cws_home/622896/description#description
• Journal of Learning Disabilities	J Learn Disabil	ldx.sagepub.com/
• Journal of Medical Speech-Language Pathology	J Med Speech Lang Pathol	cengagesites.com/academic/?site=3802
• Journal of Neurolinguistics	J Neurolinguistics	www.elsevier.com/wps/find/journaldescription.cws_home/866/description#description
• Journal of Psycholinguistic Research	J Psycholinguist Res	www.springer.com/psychology/journal/10936
• Journal of Speech, Language, and Hearing Research	J Speech Lang Hear Res	jslhr.asha.org
• Journal of Speech and Language Pathology, Applied Behavior Analysis	J Speech Lang Pathol Appl Behav Anal	www.baojournal.com/SLP-ABA%20WEBSITE/index.html
• Journal of Stuttering Therapy, Advocacy and Research	J Stutt Ther Advocacy Res	www.journalofstuttering.com
• Journal of Vestibular Research: Equilibrium & Orientation	J Vestib Res	www.iospress.nl/html/09574271_ita.html
• Journal of Voice	J Voice	www.jvoice.org
• Language & Cognition	Lang Cogn	www.languageandcognition.net/Language_and_Cognition/Language_and_Cognition.html
• Language & Communication	Lang Commun	www.elsevier.com/wps/find/journaldescription.cws_home/616/description#description
• Language and Speech	Lang Speech	las.sagepub.com
• Language Learning	Lang Learn	www.wiley.com/bw/journal.asp?ref=0023-8333
• Language Learning and Development	Lang Learn Dev	www.tandf.co.uk/journals/titles/1547-5441
• Language, Speech, and Hearing Services in Schools	Lang Speech Hear Serv Sch	lshss.asha.org

• Learning & Perception	Learn Percept	akkr.hu/42/journals/products/psychology/learning_perception_eng
• Learning Disabilities	Learn Disabil	www.ldworldwide.org/ldinformation/researchers/ld_a_contemporary_journal.html
• Learning Disabilities Research and Practice	Learn Disabil Res Pract	www.wiley.com/bw/journal.asp?ref=0938-8982
• Learning Disability Quaterly	Learn Disabil Q	www.cldinternational.org/Publications/LDQ.asp
• Logopedics Phoniatics Vocology	Logoped Phoniatr Vocol	informahealthcare.com/loi/log
• Multilingua	Multilingua	www.degruyter.de/journals/multilin
• Noise & Health	Noise Health	www.noiseandhealth.org
• Perceptual and Motor Skills	Percept Mot Skills	www.ammonsscific.com/AmSci
• Perspectives on Language Learning and Education	Perspect Lang Learn Educ	div1perspectives.asha.org
• Perspectives on Language and Literacy	Perspect Lang Lit	www.interdys.org/Perspectives.htm
• Perspectives on neurophysiology and neurogenic speech and language disorders	Perspect Neurophysiol Neurogenic Speech Lang Disord	div2perspectives.asha.org/
• Phonetica	Phonetica	content.karger.com/ProdukteDB/produkte.asp?Aktion=JournalHome&ProduktNr=224275
• Pró-Fono	Pro Fono	www.profono.com.br
• Quaterly Journal of Speech	Q J Speech	www.tandf.co.uk/journals/titles/00335630.asp
• Seminars in Hearing	Semin Hear	www.thieme.com/index.php?page=shop.product_details&flypage=flypage.tpl&product_id=906&category_id=56&option=com_virtuemart&Itemid=53
• Seminars in Speech and Language	Semin Speech Lang	www.thieme.com/index.php?page=shop.product_details&flypage=flypage.tpl&product_id=904&category_id=56&keyword=seminars+in+speech+and+language&option=com_virtuemart&Itemid=53
• South African Journal of Communication Disorders	S Afr J Commun Disord	www.sajcd.org.za/index.php/SAJCD/index
• Sprache Stimme Gehör	Sprache Stimme Gehör	www.thieme.de/fz/ssg.html

• Speech Communication	Speech Commun	www.elsevier.com/wps/find/journaldescription.cws_home/505597/description#description
• Topic in Language Disorders	Top Lang Disord	journals.lww.com/topicsinlanguagedisorders/pages/default.aspx
• The Volta Review	Volta Review	agbell.org/NetCommunity/Page.aspx?pid=501
• Volta Voices	Volta Voices	agbell.org/NetCommunity/Page.aspx?pid=256

* *The following list consists of journals that are currently published.*