

DEFINITION

- 1 **Stuttering** is a disorder of speech characterised by frequent repetitions or prolongations of sounds or syllables with marked impairment of fluency of speech.

CLINICAL MANIFESTATION

- 2 There is marked impairment of speech involving both rate and rhythm which results in impaired speech intelligibility. Speech is erratic and dysrhythmic often with faulty phrasing patterns. The extent of the disturbance varies from situation to situation and is more severe when there is pressure to communicate.
- 3 The onset is usually insidious during the course of speech and language development between the ages of 2 – 7 years. The child is at first not aware of the stuttering but later becomes aware and may adopt mechanisms to avoid the disturbance. These include avoidance of certain speech situations – e.g. use of telephone and avoidance of certain words or sounds.
- 4 There may be associated emotional or motor features. These include anxiety, frustration, low self-esteem and motor movements such as tics, head-jerking or tremors. In adults the condition may restrict occupational choices.

AETIOLOGY

- 5 Approximately 5% of children and 1% of adults have stuttering, the male to female ratio being 3 to 1. There is a strong family incidence and studies have reported that as many as 50% of first degree biological relatives are affected.
- 6 Recent research provides strong evidence of a genetic factor in the aetiology.
- 7 Stress and anxiety have been shown to exacerbate stuttering but are thought not to play a causal role.

CONCLUSION

- 8 **Stuttering** is a disorder of speech which is genetic in aetiology. Stress and anxiety may exacerbate the condition.

REFERENCES

American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders. 3rd Ed. 1980. Washington D C. American Psychiatric Association. p86–88.

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