







SOUTHWEST REHABILITATION

Upcoming Events:

Didgeridoo Club

April 13, 2017 May 11, 2017

Stroke Club

April 20, 2017 May 18, 2017





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In the Spotlight

Spring Newsletter:

What is Myofascial Release and Why is it Beneficial?

When patients come to our office with complaints of pain with voice or swallowing, the first question asked, "Is it a sore throat or muscle pain?" A sore throat is usually an indication of a virus, bacterial infection or irritation from acid refluxed from the stomach and treatable. With muscle pain, however, the use of **myofascial release** has become an accepted method of treatment. "When we place our hands on a patient and move them in a certain manner, pain will often lessen and function will often improve," states Waltz Fritz, P.T.

In his course, "Myofacial Release for Voice and Swallowing Problems," Fritz explained that, anatomically, "fascia" is used interchangeably with connective tissue. Fascia surrounds, separates, and invests muscles, groups of muscles, nerves, bones, organs, blood vessels, and nearly everything in the body. He indicated that fascia serves the purpose of binding structures together while allowing others to slide over another. By following the principles of neurodynamic technique, Fritz demonstrated elongation of the elastic portion of the connective tissue until shortened collagen fibers are encountered and then using a sustained hold of the stretch. The surrounding ground substance softens and allows the collagen to be permanently stretched, effectively reducing tightness and pain. Locating and isolating a suspected area of the body and addressing the issue through traction, such issues as tightness, discomfort/pain, difficulty with range of motion, loss of swallowing ease, voice changes, jaw/TMJ dysfunction can be alleviated.

Benefits of private speech therapy:

- Individualized activities
- High intensity treatment
- Year round therapy options
- Inclusion of family in sessions
- One-on-one sessions

Through use of demonstration and development of a home program, patients with muscle induced voice and swallowing issues appreciate immediate relief of their symptoms with myofascial release and muscle reeducation and, after only a few sessions, are able to self-treat.

What is Spaced Retrieval and How Does It Help People with Memory Impairments?

Spaced-Retrieval (SR) is a memory intervention that gives individuals practice at successfully recalling information over progressively longer intervals of time. The ultimate goal is for the individual to retain important information for very long periods. Therapists can use **Spaced-Retrieval** (SR) to attain treatment goals by helping individuals to remember compensatory strategies such as using a schedule, swallowing safely, using a daily calendar, and/or using a piece of adaptive equipment. There are two types of goals when applying the concept of **Spaced-Retrieval** (SR). One is fact retrieval and the other strategy learning. Fact retrieval is remembering names, locations, dates, or the name of objects. Strategy learning is teaching the use of a memory book, calendar, activity agenda, name tags, or procedures. **Spaced-Retrieval** (SR) can be used to teach safety and ambulation techniques, or to reduce anxiety by providing the answer to a repetitive question. The intention is that by facilitating goal attainment in therapy and retention of new information, persons with memory impairment may be more independent, happier, and more productive.

Summer Speech Therapy:

Summer break is almost here! For many students who receive speech/language services, the break from school also means a break in treatment. Summer speech therapy may be just what a child needs to help build upon and carryover their skills when school is not in session. During summer break, parents can help their children maintain communication skills learned during the school year. Sessions are one-on-one with a certified speech pathologist and helps promote generalization to different therapists/environments and maintenance of skills and strategies learned in school-based speech therapy. Each session is individualized and targets goals specific to the child's needs. A variety of structured programs combined with auditory and visual processing and sensory integration are used to promote learning. Parent involvement is key to our process, whether watching through the one-way mirror or participating in sessions ensures follow through with homework and carryover of skills. Cooperation with the school system and other providers (CDRC, OHSU, HeadStart, preschools, daycare, etc.) creates a cohesive approach to rehabilitation. Sessions are year round, avoiding delays in treatment during the summer months and holidays. The speech pathologist can provide parents/caregivers with goals to work on, strategies for maintaining specific skills, and materials to practice with, such as word lists or worksheets.

Stoboscopy vs. FEES - What is the Difference?

Laryngeal Stroboscopy/Videostroboscopy

Laryngeal **stroboscopy aka Videostroboscopy** is an objective measure to assess structure/gross function of the larynx, and visualize vocal fold vibration during phonation. It is used to assess and detect vocal pathology as well as determining the impact on voice and airway function. Laryngeal **stroboscopy** permits observation of the larynx when it's illuminated by intermittent flashes of light synchronized with the vibratory cycle of the vocal folds. A slow motion effect is produced when flashes are emitted at frequencies slightly different than the frequency of the vocal fold vibration. A 35 mm camera is attached to a ridged or flexible scope and used in conjunction with a strobe. A small endoscope is inserted through the mouth towards the back of the tongue. The endoscope provides a telescopic video recording of the larynx. The speech pathologist will have the individual perform various voice tasks in order to observe the movement of the vocal cords and the condition of the larynx.



Fiberoptic Endoscopic Evaluation of Swallowing (FEES)



Fiberoptic Endoscopic Evaluation of Swallowing (FEES) is an objective measurement of an individual's swallow function. A FEES is used to assess the oral, pharyngeal, and opening of the esophagus during trial intake of solids and liquids. It clearly defines the anatomy and demonstrates the safety of the swallow. During endoscopy, the SLP uses a very small flexible endoscope with a camera and light on the end. A numbing agent is placed in the nostril and the endoscope is gently passed through the nasal cavity into the hyperpharynx. Liquids and solids are provided. The endoscope connects to a computer and video monitor. The swallowing test is recorded so that it can be watched again later.