

## **Stuttering Symptoms**

The essential feature of Stuttering is a disturbance in the normal fluency and time patterning of speech that is inappropriate for the individual's age. This disorder is most commonly diagnosed in childhood.

At the onset of Stuttering, the speaker may not be aware of the problem, although awareness and even fearful anticipation of the problem may develop later. The speaker may attempt to avoid stuttering by linguistic mechanisms (e.g., altering the rate of speech, avoiding certain speech situations such as telephoning or public speaking, or avoiding certain words or sounds). Stuttering may be accompanied by motor movements (e.g., eye blinks, tics, tremors of the lips or face, jerking of the head, breathing movements, or fist clenching).

Stress or anxiety have been shown to exacerbate Stuttering. Impairment of social functioning may result from associated anxiety, frustration, or low self-esteem. In adults, Stuttering may limit occupational choice or advancement. Phonological Disorder and Expressive Language Disorder occur at a higher frequency in individuals with Stuttering than in the general population.

## **Specific Symptoms of Stuttering**

Disturbance in the normal fluency and time patterning of speech (inappropriate for the individual's age), characterized by frequent occurrences of one or more of the following:

- sound and syllable repetitions
- sound prolongations
- interjections
- broken words (e.g., pauses within a word)
- audible or silent blocking (filled or unfilled pauses in speech)
- circumlocutions (word substitutions to avoid problematic words)
- words produced with an excess of physical tension
- monosyllabic whole-word repetitions (e.g., "I-I-I-I see him")

The disturbance in fluency interferes with academic or occupational achievement or with social communication.

If a speech-motor or sensory deficit is present, the speech difficulties are in excess of those usually associated with these problems.