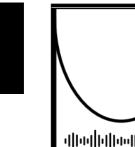
ASSOCIATIONS BETWEEN ACOUSTIC, KINEMATIC, SELF-REPORTED, AND PERCEPTUAL BASED

MEASURES OF SPEECH IN INDIVIDUALS SURGICALLY TREATED FOR ORAL CANCER











Thomas B. Tienkamp¹, Teja Rebernik^{1,2}, Bence M. Halpern^{2,3,4}, Rob J.J.H. van Son^{2,3}, Martijn Wieling¹, Max J.H. Witjes¹, Sebastiaan A.H.J. de Visscher¹, and Defne Abur¹ University of Groningen, ² The Netherlands Cancer Institute, ³ University of Amsterdam, ⁴ Delft University of Technology

INTRODUCTION

- Postoperative speech is one of the top priorities of individuals treated for oral cancer [1]
- No gold standard exists to assess speech outcomes of individuals treated for oral cancer
 - ightarrow Need to understand interrelatedness between **domains** of acoustic, kinematic, perceptual, self-reported measures

Study aims

Aim 1: Determine which domains differ between control speakers and individuals treated for oral cancer

Aim 2: Assess interrelatedness of domains for individuals treated for oral cancer

METHODS

- Individuals treated for tongue or jaw tumours (T1-T4)
- North Wind and the Sun passage in eight sentences
- → Acoustic and articulographic (EMA) recordings

Group	N	Age (sd)	Time post-op (sd)
Control	8 (5M; 3F)	60.9 (7.1)	-
Tongue	4 (3M; 1F)	59 (11.7)	6.33 years (4.85)
Jaw	5 (2M; 3F)	63.6 (8.0)	4.14 years (2.6)

Measures

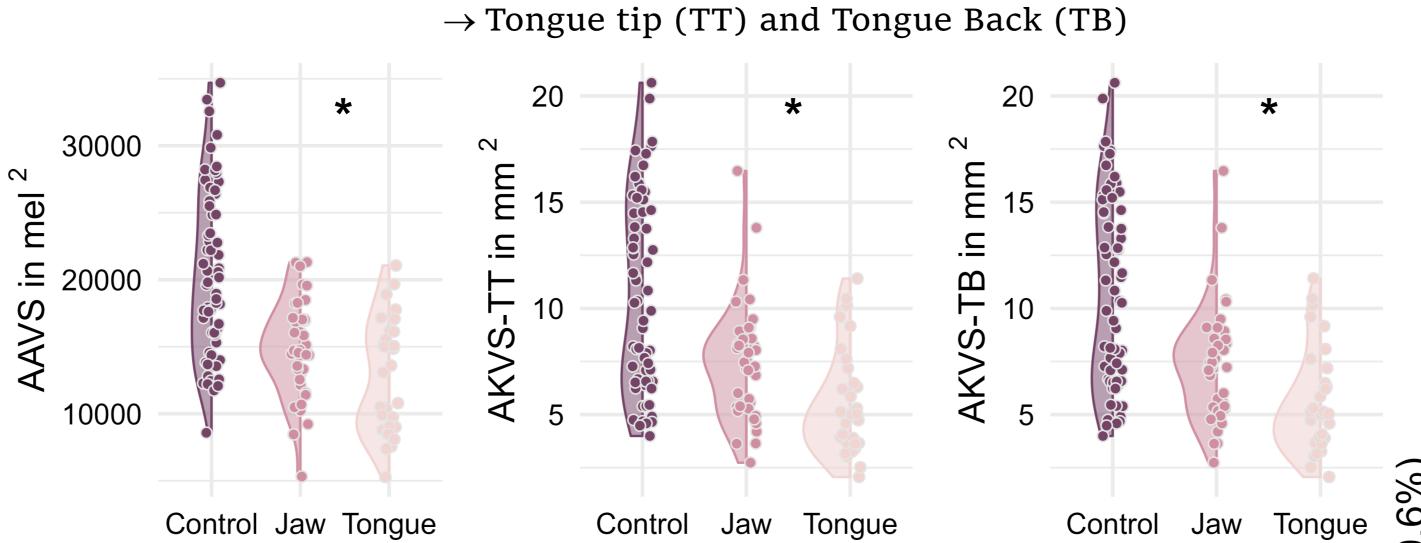
- 1. Articulatory Acoustic Vowel Space (AAVS [3-4])
- 2. Articulatory Kinematic Vowel Space (AKVS [4-5])
- 3. Perceptual listening effort & intelligibility (inexperienced listeners)
- 4. Self-reported outcomes (Speech Handicap Index [2])



RESULTS AIM 1:

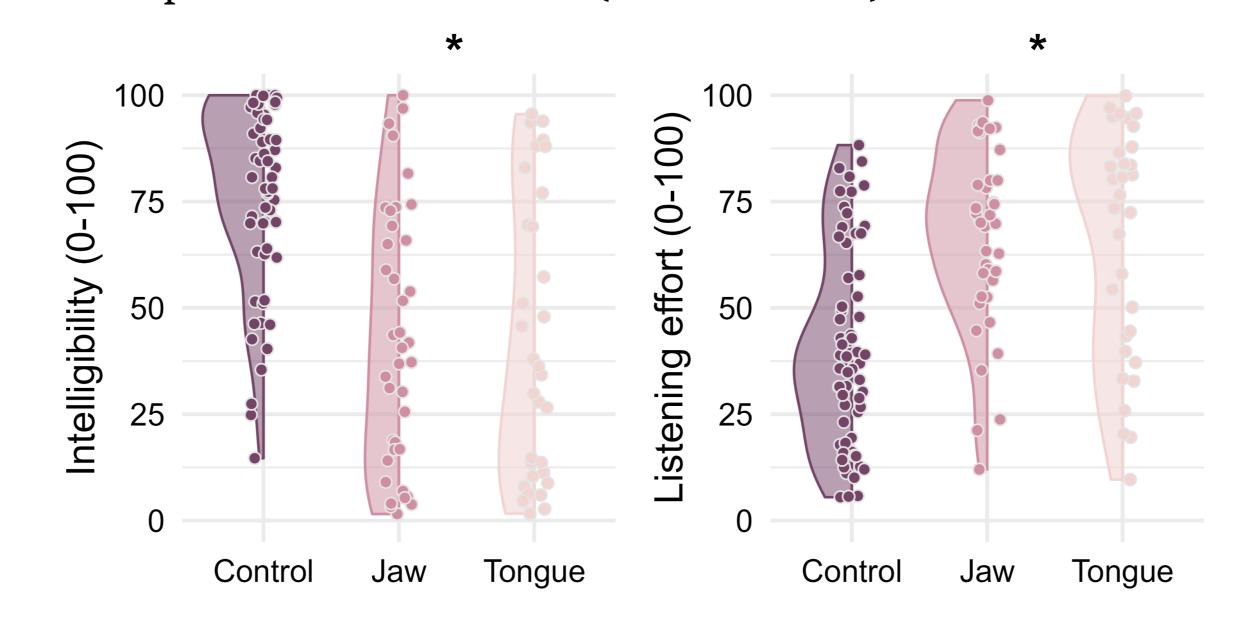
Articulatory Acoustic and Kinematic Vowel Space

- Acoustic (AAVS): F_1 - F_2 trajectories of voiced segments [3-4]
- Kinematic (AKVS): X and Y coordinates of all segments [4-5]



Perceptual intelligibility and listening effort

- 35 inexperienced listeners (13M, 22F, mean age: 36.1 years)
- Visual Analogue Scale rating procedure
- Multi speaker babble added (SNR of +2dB)

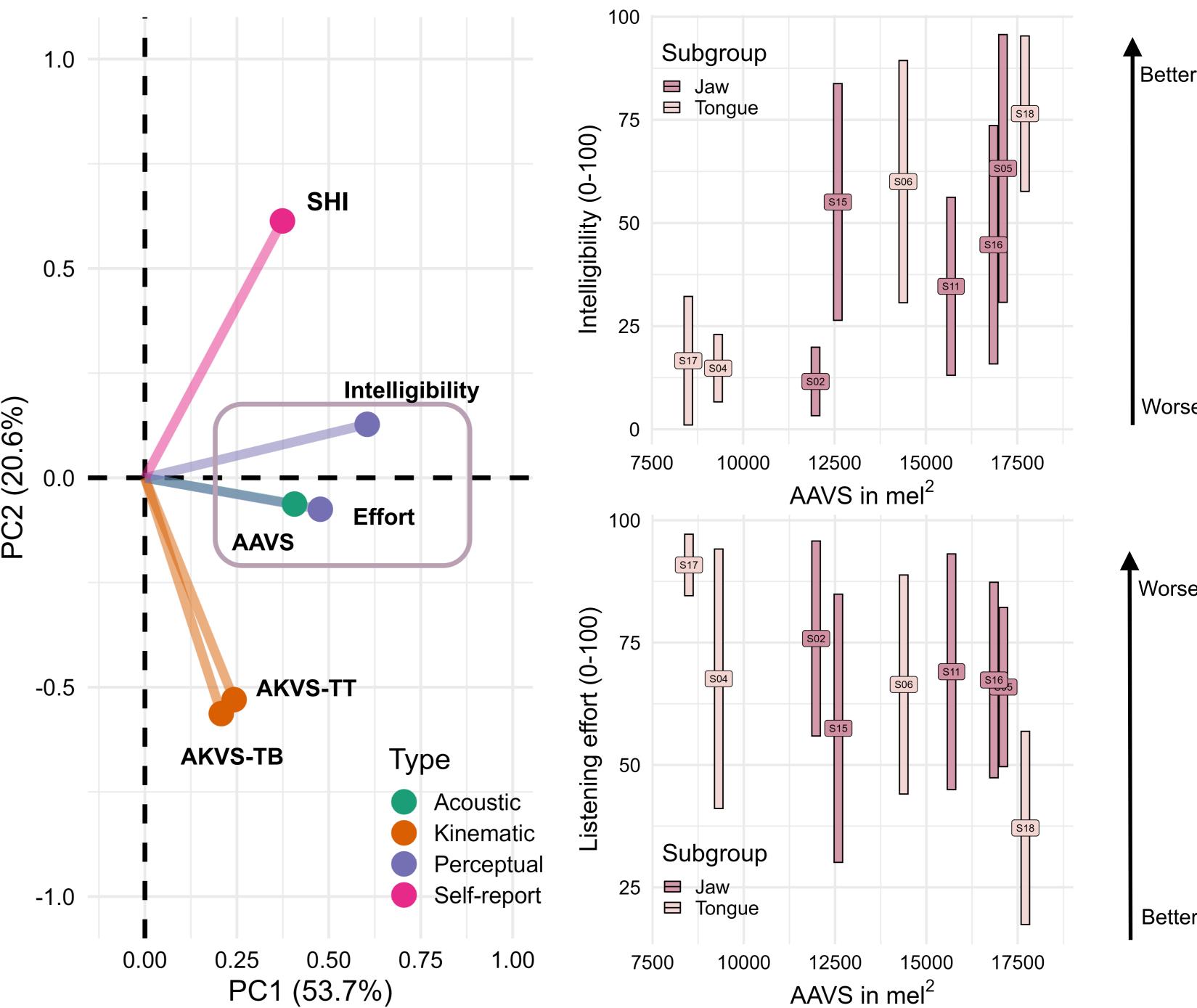


Group differences

- Individuals treated for oral cancer score lower across domains (acoustic, kinematic, perceptual) compared to control speakers:
- \rightarrow Mean Z-score difference: β = -0.96 SD, p < 0.001

RESULTS AIM 2:

- Principal Comonent Analysis (PCA)
- \rightarrow PC1 and PC2 explain ±75% of the data



DISCUSSION & CONCLUSION

Aim 1: group differences

- All measures showed differences between control speakers and individuals treated for oral cancer
- \rightarrow Highlights the multifaceted nature of the speech problems of individuals treated for oral cancer

Aim 2: interrelatedness of domains

Twitter / X:

@tejareberik

@BenceHalpern

@ThomasTienkamp

- Findings highlight interrelatedness of acoustic and perceptual measures
- \rightarrow No clear association between acoustics and kinematics

REFERENCES

[1] Tschiesner et al.(2013). Priorities of head and neck cancer patients: A patient survey based on the brief ICF core set for HNC. European Archives of Oto-Rhino-Laryngology, 270(12), 3133-3142.

[2] van den Steen et al. (2011). De spraak handicap index: Een instrument voor zelfevaluatie bij dysartriepatiënten. Logopedie, 24, 26-30.

[3] Whitfield & Goberman (2014). Articulatory-acoustic vowel space: Application to clear speech in individuals with Parkinson's disease. Journal of Communication Disorders, 51, 19-28 [4] Whitfield et al. (2018). Examining Acoustic and Kinematic Measures of Articulatory Working Space: Effects of Speech Intensity. Journal of Speech, Language, and Hearing Research, 61(5), 1104-1117.

[5] Abur et al. (2022). Impact of Vocal Effort on Respiratory and Articulatory Kinematics. Journal of Speech, Language, and Hearing Research, 65(1), 5-21.

CONTACT

@martijnwieling @defneabur

Website:

https://aburlab.web.rug.nl/
https://3dlabgroningen.nl/
http://slg.web.rug.nl/

