

## Multiparametric speech assessment

Alain Ghio, Thierry Legou  
Laboratoire Parole et Langage  
CNRS & Université de Provence  
Aix-en-Provence  
France

Speech DBS  
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### Speech assessment : to what purpose?



- For rehabilitation : pathology is known, rehabilitation goal is defined
  - ✓ Assessment = to control the goal
  - ✓ Important to evaluate the results (only 1 patient /10 finish voice rehabilitation)
- The patient is its own reference
- Example: rehabilitation of parkinsonian hypophonia
  - Measurement of SPL intensity

## Speech assessment : to what purpose?



- To quantify the speech disorder and compare patients

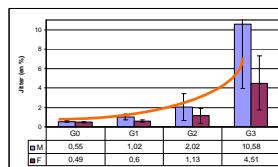
Yu P., Garrel R., Nicollas R., Ouaknine M., Giovanni A., "Objective voice analysis in dysphonic patients. New data including non linear measurements", Folia Phoniatrica et Logopaedica, 59:20-30, 2007

- ✓ 449 speakers (including 391 patients)
- ✓ Perceptual assessment with GRBAS scale (Hirano, 1981)
- ✓ Instrumental assessment :
  - ◊ Jitter, signal/noise ratio
  - ◊ max phonation time, voice range,
  - ◊ Estimated sub-glottal pressure, oral airflow
- ✓ Correlation between (perceptual) severity and measures

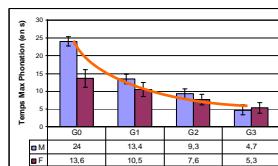
## Multiparametric voice assessment



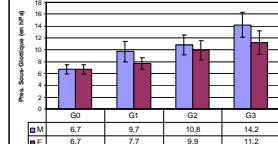
- Jitter



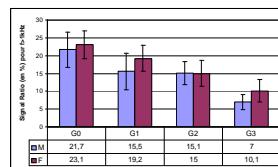
- TMP



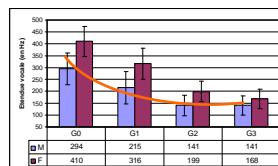
- ESGP



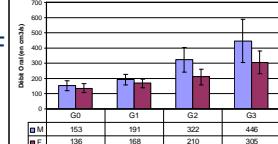
- SR



- VR



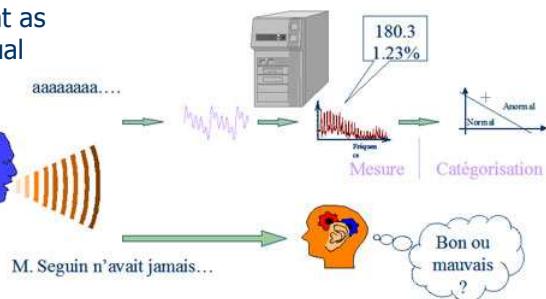
- OAF



## Hearing machines?



- Instrumental assessment as complement of perceptual assessment

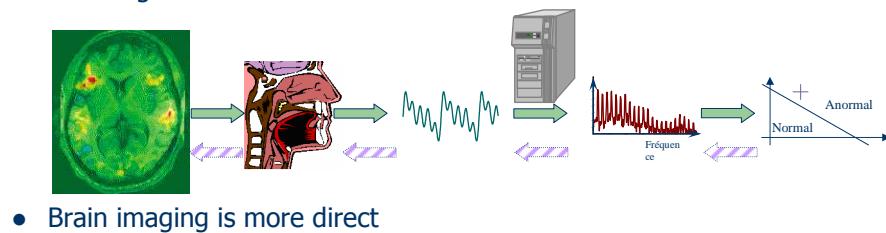


- ... but instruments are not hearing machines
  - Instrument can measure phenomena which can be not audible
  - Human can hear information that instrument can not measure

## Speech assessment : to what purpose?



- Speech disorder as a marker of
  - ✓ Neurological disease
  - ✓ Therapeutic effect
    - Pharmacologic
    - Stimulation
- Instrumental speech assessment: indirect way to catch the general neurological disorder



- Brain imaging is more direct

✓

## Instrumental assessment of speech

The diagram illustrates the instrumental assessment of speech across several domains:

- KYNESIO:** Shows a person wearing sensors for Electromagnetic Articulography and Electro-PalatoGraphy.
- Audio:** Represented by a sound wave.
- AERO:** Represented by a head profile showing Airflows and Pressures.
- ELECTROPHYSIO:** Shows a person with a green circle on their neck and a waveform labeled "F0 moy" (mean F0).
- IRM:** Magnetic Resonance Imaging (IRM) scan of a head.
- IMAGING:** Head profile image.
- Electro-GlottoGraphy:** Shows a waveform of vocal fold oscillations.
- Electro-MyoGraphy:** Shows a waveform of muscle activity.

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## Laryngeal function acoustic assessment

- Measuring F0 instability
  - Medium term instability (coef. variation of F0, trémor)
  - Short term instability (jitter, shimmer)
  - Global structural instability (coef. Lyapounov)
- Signal/noise ratio
- Effort measure
  - Maximal phonation time
  - Voice range (phonetogram)
- Techniques based on automatic speaker recognition

Diagrams and plots include:

- Stability sur la fréquence fondamentale (F0) graph showing F0 moy, F0 instabilité, and F0 totale.
- Short term instability (jitter, shimmer) graph showing F0 instabilities over cycles 3 and 4.
- Global structural instability (coef. Lyapounov) graph showing F0 instabilities over cycles 3 and 4.
- Signal/noise ratio graph.
- Effort measure graph showing Maximal phonation time and Voice range (phonetogram).
- Techniques based on automatic speaker recognition graph showing Instabilité totale.
- Keyboard and spectrogram interface for speaker recognition.

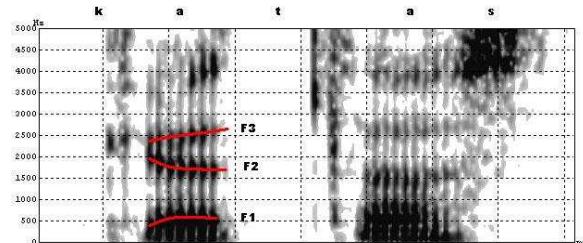
Fredouille, C., Poujoulin, G., Bouisset, J.-F., Azzarello, M., Giovannini, A., Ghio, A. Application of Automatic Speaker Recognition techniques to pathological voice assessment (dysphonia). Proceedings of European Conference on Speech Communication and Technology (Eurospeech) 2005 (Sep. 2005 : Lisbon), 2005, 159-162

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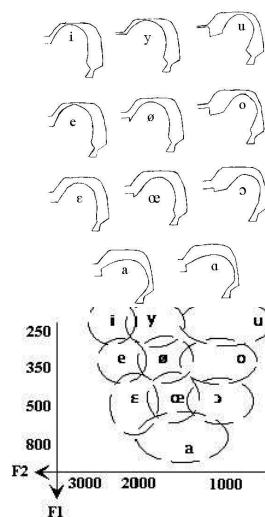
## Acoustic speech assessment



- Measuring formants
  - ✓ Formant = frequency resonance
  - ✓ Linked to vowel articulation
  - ✓ In theory, F1  $\Leftrightarrow$  opening, F2  $\Leftrightarrow$  front
- Static measuring  $\Leftrightarrow$  precision
- Transitions  $\Leftrightarrow$  dynamic
- Vowels formants can be centralised



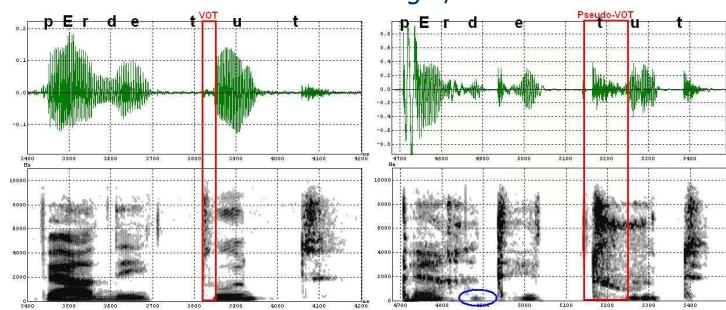
Weismair G, Jeng JY, Laurens JS, Kent RD, Kent JF (2001), Acoustic and intelligibility characteristics of sentence production in neurogenic speech disorders, *Folia Phoniatr Logop.* 2001 Jan-Feb;53(1):1-18



## Acoustic speech assessment



- Voice Onset Time
  - ✓ VOT = temporal delay between burst and voice
  - ✓ Indicator of coordination between articulators and vocal folds
- Bad coordination can introduce longer/shorter time

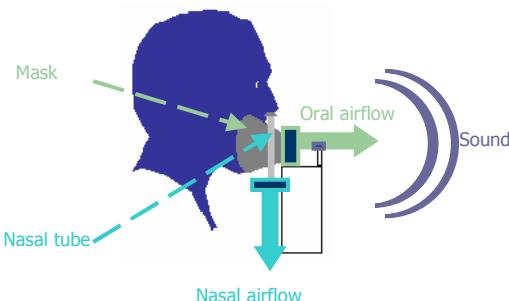
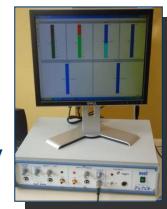


Morris R. J., "V.O.T. and dysarthria: a descriptive study", *Journal of communication disorders (J. commun. disord.)*, 1989, vol. 22, no1, pp. 23-33

Özsancak C. ; Auzou P. ; Jan M. ; Hannequin D. (2001), « Measurement of voice onset time in dysarthric patients : Methodological considerations (Mesure du VOT chez les patients dysarthriques: aspects méthodologiques) », *Folia phoniatrica et logopaedica (Folia phoniatr. logopaed.)* vol. 53, no1, pp. 48-57

## Aerophonometry : why ?

- Speech is based on air movement : phonation, consonant noise
- Speech is the result of a precise and regulated control of expiration and constraints linked to the flow in the vocal tract
- EVA 2 system : multiparametric speech recorder developed by LPL and distributed by SQLab company



## Aerophonometry advantages

- Acoustic signal = source + complex filter
- Aerophonometry
  - ✓ more direct
  - ✓ more selective
- Information on dynamic and coordination of organs



## Clinical applications of aerophonometry

- Objectives measures of pneumo-phonatory disorders
- Objectives measures of articulatory disorders
  - ✓ Velum (rhinolalia)
  - ✓ Precision and coordination of lingual and labial gestures

## Voice analysis with aerophonometry

Robert D., Pouget J., Giovanni A., Azulay J.P., Triglia J.M., (1999) "Quantitative Voice Analysis in the Assessment of Bulbar Involvement in Amyotrophic Lateral Sclerosis", Acta Otolaryngol (Stockh), , 119:724-731

- 63 female ALS patients :
  - ✓ 40 with bulbar symptoms (sALS patients)
  - ✓ 23 without bulbar symptoms (aALS patients)
- 40 normal female subjects
- Acoustic and aerodynamic measures were significantly different between sALS patients and control patients
- Measurements can predict bulbar involvement in 73% of those in the sALS group

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15

## Pneumophonatory coordination

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16

## Pneumophonatory coordination

SARR, M.; PINTO, S.; JANKOWSKI, L.; PURSON, A.; GHIO, A.; ESPESSER, R.; TESTON, B.; VIALLET, F. (2009). L-dopa and STN stimulation effects on pneumophonic coordination in Parkinsonian dysarthria: intra-oral pressure measurements. International Congress of Parkinson's Disease and Movement, vol. 24, no. S1. 2009, p. S342.

- Parkinson disease and effect of DBS
- Estimated sub glottal pressure of PD patients (with DBS ON/OFF) and control speakers

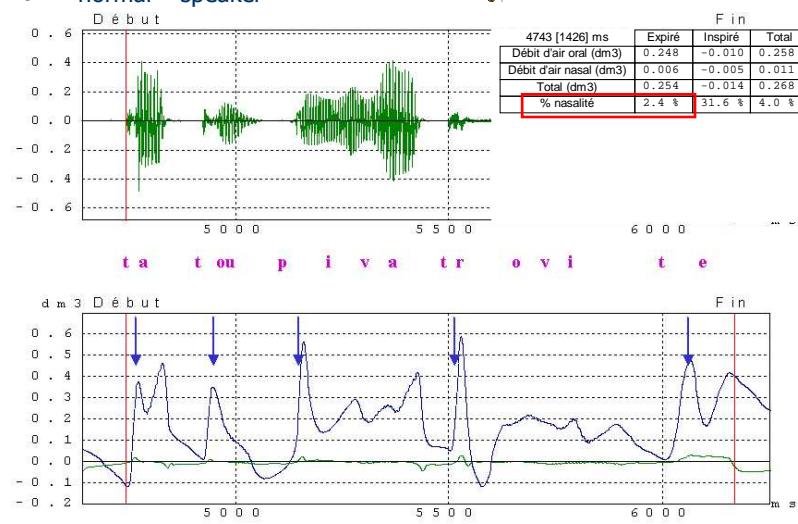
Segment	OFF STIM	ON STIM	CTRL
P1	~3.5	~3.8	~5.3
P2	~6.0	~6.8	~6.8
P3	~4.7	~5.1	~5.6
P4	~4.7	~5.1	~5.6
P5	~4.3	~4.8	~5.8
P6	~4.6	~4.8	~5.6

● OFF STIM  
● ON STIM  
● CTRL

## Aerophonometry and velum motricity



- « normal » speaker



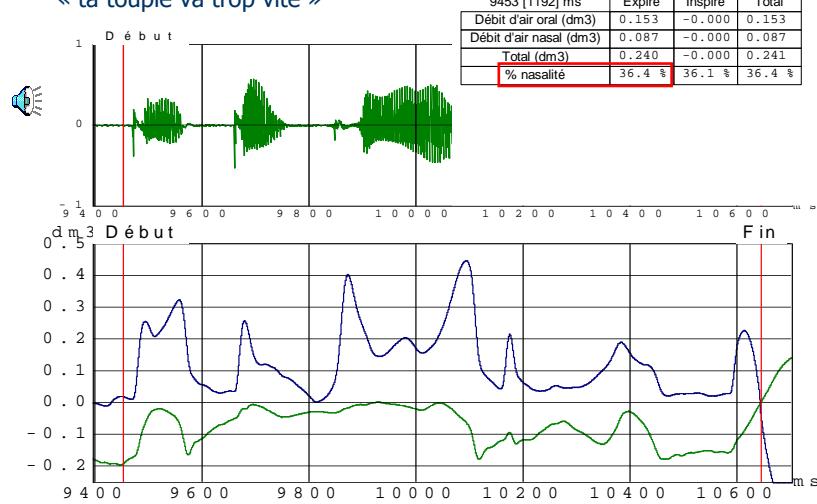
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17

## Aerophonometry and velum motricity



- Parkinson woman ON-dopa (884)  
« ta toupie ya trop yite »



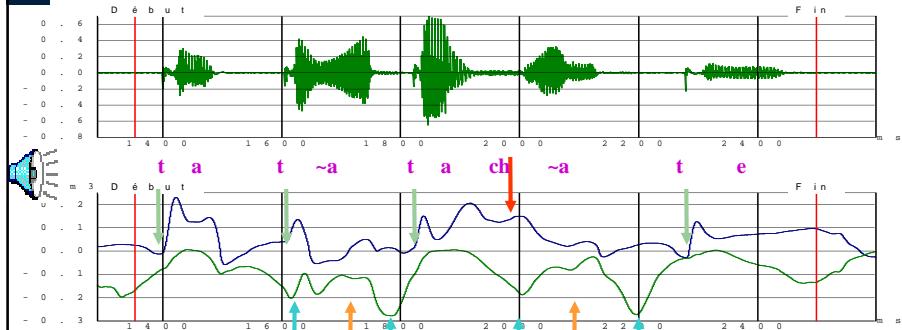
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18

## Aerophonometry and velum motricity



- Parkinson woman ON-dopa (884)  
« ta tante a chanté »



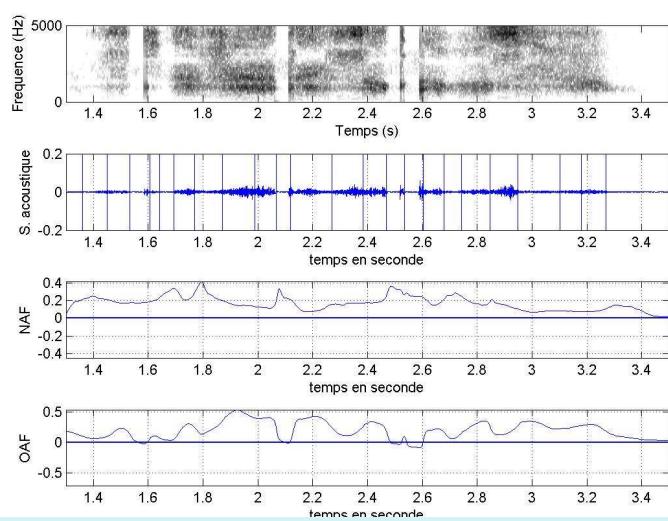
- Nasal Airflow is more important on stop consonants

19

## Aerophonometry and velum motricity



Loc5 : maladie de Steinert



Document From Amelot et Roubeau (HEPG, Tenon, Paris, France)

20

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## Aerophonometry and velum motricity

Robert D., Sangia I., Azulay J.P., Giovanni A., Cannoni M., Pouget J. (1995), "Diagnostic et suivi de l'insuffisance vélaire dans les formes bulbares des maladies du motoneurone", Actes du congrès sur le Voile Pathologique, Société Française de phoniatrice, Lyon, p.63-74.

- ENT
- Neurologists

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21

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## Electrophysiological techniques

**ElectroGlottography  
EGG**

**Electromyography  
EMG**

**Electropalatographie  
EPG**

**Electroencephalography  
EEG**

**MRI**

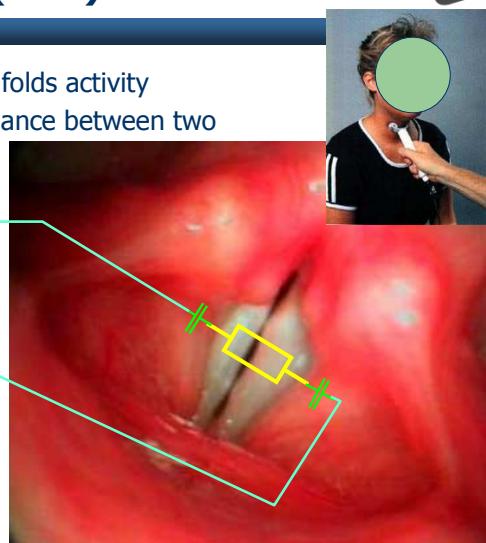
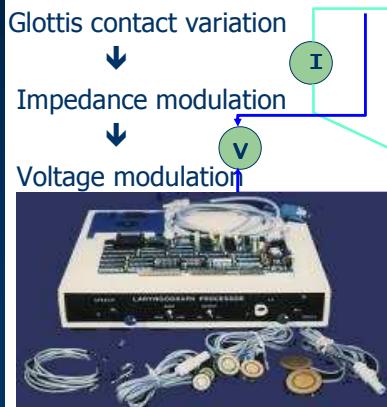
**Electromagnetic articulograph  
EMA**

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## Electroglottography (EGG)

- Why: To have an image of vocal folds activity
- How: Measurement of the impedance between two electrodes applied on the neck



## Electroglottography (EGG)

### Comments:

- + Very good measurements of the glottis oscillation frequency
- does not measure the glottis aperture area

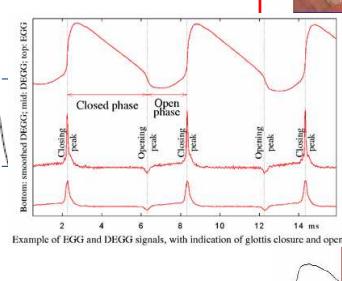
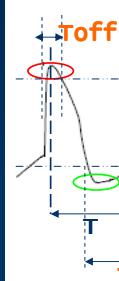
It is not an acoustic signal

### Remarks

Modulation impédance:  $100\text{mOhm}$

Courant injecté:  $1\text{mA}$

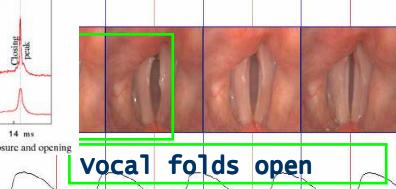
Amplitude de l'information:  $100\mu\text{V}$



vocal folds closed



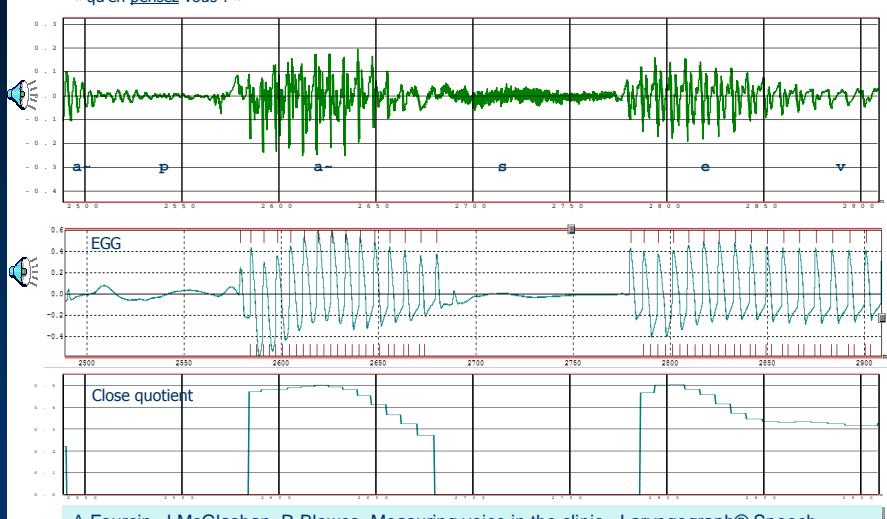
vocal folds open



## EGG signal



« qu'en pensez vous ? »



A.Fourcin, J.McGlashan, R.Blowes, Measuring voice in the clinic - Laryngograph® Speech Studio analyses (Presented at the 6th Voice Symposium of Australia. Adelaide, Oct. 2002)

## Electromyography (EMG)

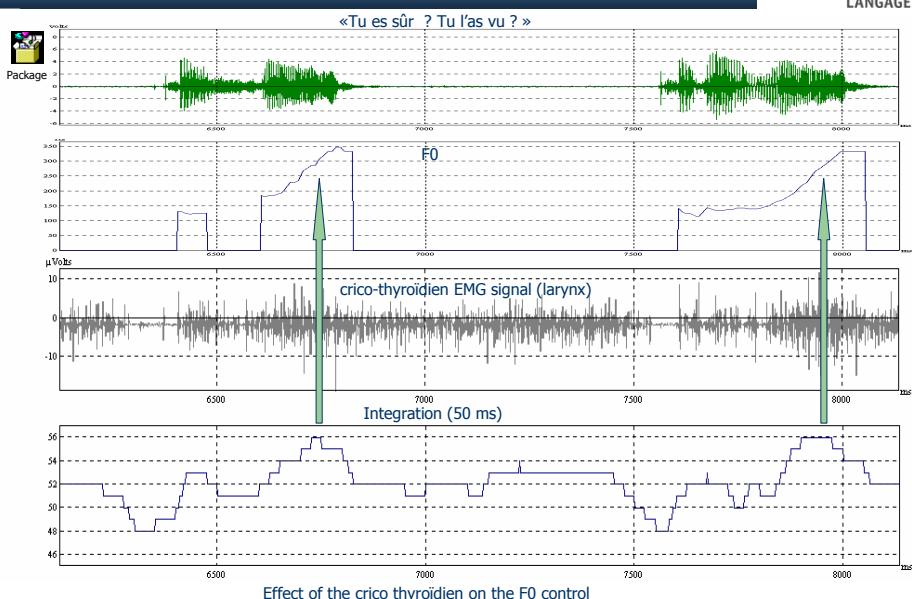


- Why: To measure the muscle activity
- How: by recording on the skin the electrical activity, just above the muscle. (sometimes in the muscle itself)
- Comments: EMG signals are difficult signals to handle,
  - a lot of kind bursts with a large variety of statistic properties,
  - a poor signal to noise (SNR) ratio

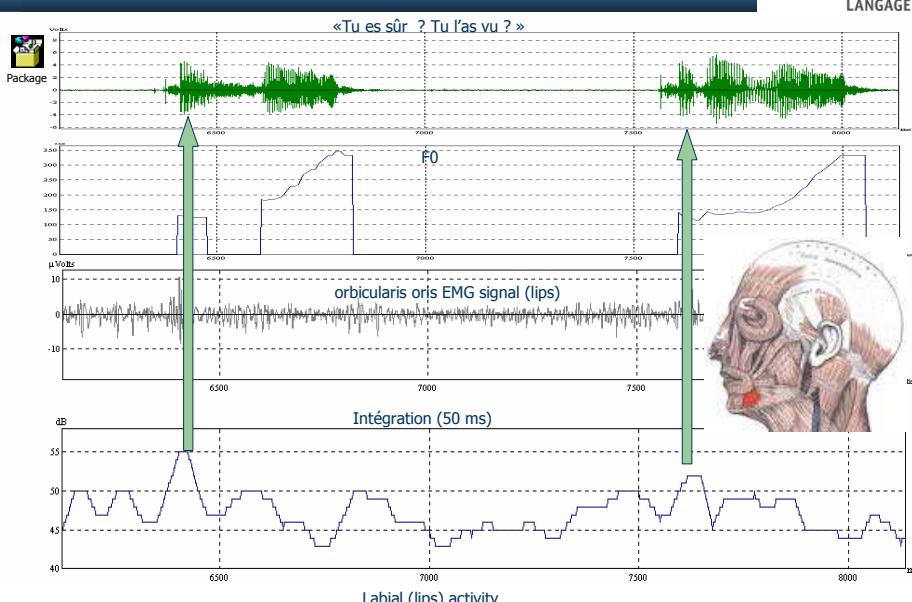


Pellat J, Gentil M, Chevalier C, Vila A, Pollak P, Perret J., (1983), Electromyographic study of 4 lip muscles and acoustic findings in parkinsonian dysarthria, Rev Neurol, 1983;139(3):205-13.

## EMG signal analysis



## EMG signal analysis



## Electropalatography (EPG)



### AN EPG THERAPY PROTOCOL FOR REMEDIATION AND ASSESSMENT OF ARTICULATION DISORDERS

Alan Wrench, Fiona Gibbon, Alison M McNeill and Sara Wood

Department of Speech and Language Sciences  
Queen Margaret University College, Edinburgh, UK.  
awrench@qmuc.ac.uk, fgibbon@qmuc.ac.uk, swood@qmuc.ac.uk

#### ABSTRACT

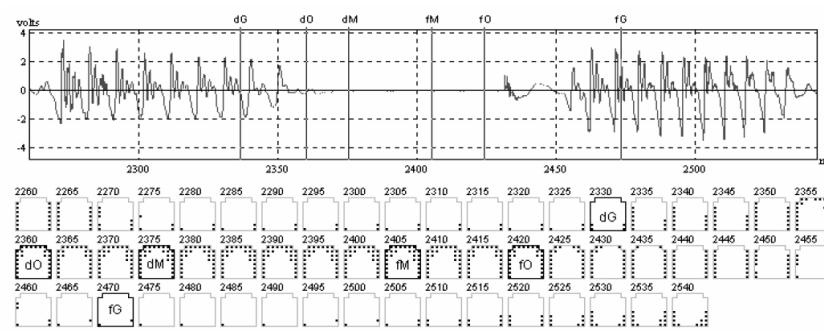
This paper describes technical and methodological advances in the development of a procedure for measuring changes in accuracy and stability of linguopalatal (tongue-palate) contact patterns during a course of visual feedback therapy using electropalatography (EPG). The procedure is exemplified by a case in which therapy was aimed at resolving a pattern of velar fronting whereby phonetic targets /k, g, ɣ/ had abnormal alveolar placement [t, d, n]. The EPG remediation and assessment procedure can be implemented using recording, feedback and analysis software designed for the purpose.

#### I. INTRODUCTION

One potentially valuable diagnostic and therapy procedure for articulation disorders is electropalatography (EPG). EPG records details of the location and timing of tongue contact with the hard palate during speech [1]. The instrument records alveolar, post-alveolar, palatal, and velar placement, and registers characteristic patterns for many consonants and vowels that occur in English, making it a useful technique for



## Exploitations des mesures EPG

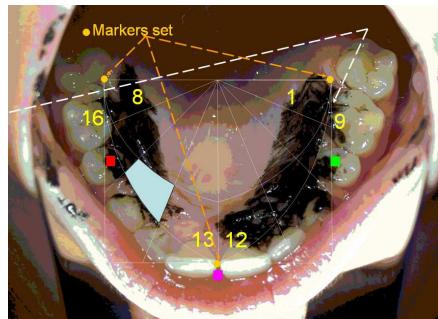
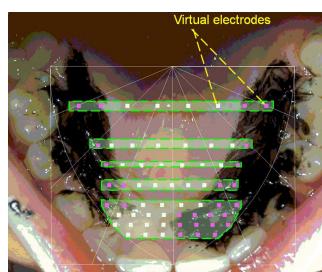


Le début (d) et la fin (f) de chaque phase linguopalatale (G pour geste, O pour occlusion et M pour maximum de contacts) sont indiqués sur l'oscillogramme et le signal EPG [locY]

## Static palatography (SPG)



To overcome the EPG limitations....  
 + Simple instrumentation, permits to study teeth contacts, no blind zone,  
 - only one articulation (one shot)



## ElectroMagnetic Articulograph (EMA)



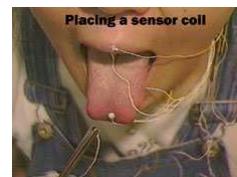
Why?: To study relatives position, speed and accelerations of main articulators (jaw, tongue, lips).

How?: The participant is place inside 3 magnetic fields. Sensors (inductors) are stuck on the articulator to study, and they record a part of each of the 3 fields depending on their positions and orientation.

### Comments:

- 12 sensors
- Not less than 10 mm between two sensors
- 200Hz sampling frequency

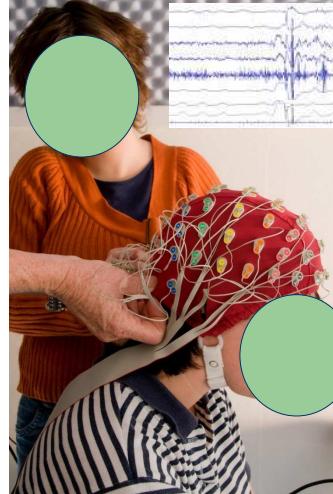
Jaeger M, Hertrich I, Stattrop U, Schönlé PW, Ackermann H, (2000), Speech Disorders following Severe Traumatic Brain Injury: Kinematic Analysis of Syllable Repetitions Using Electromagnetic Articulography, *Folia Phoniatrica et Logopaedica*, Vol. 52, No. 4



Placing a sensor coil

## Electroencephalography (EEG)

- ❑ Why?: To provide information on the neurophysiological activity of the brain over time.
- ❑ How?: Through electrodes placed on the scalp. The electrical signal on the scalp is the result of the summation of action potentials synchronous a large number of neurons.
- ❑ Comments  
very weak signal recorded on the scalp,
- ⌚ average calculation is needed  
(large number of runs to improve the SNR).  
time accurate, source localization is tricky



## Magnetic Resonance Imaging (MRI)

- ❑ Why?: because MRI can acquire accurate (1 mm) 3D images of cortex, white matter, cerebro-spinal and basal ganglia.

- ❑ How?:

1. by observing the biological tissue through the magnetic properties of one of their principal constituents: **the nucleus of hydrogen**.
2. Placed into an intense magnetic field ( $T$ ), it results a magnetization at each point of the tissue (the magnetization is proportional to the density of hydrogen nuclei)
3. The temporal characteristics of this relaxation (after the Magnetic resonance) depends strongly on the tissue



- ❑ Comments

Good localization,

In case of fMRI quite slow (a few Hz)

Very noisy environment ( $\pm 110\text{dB}$ )



These techniques can be combined...but not too much!?

The slide contains three photographs. The top-left photo shows a person wearing a dense mesh cap with numerous wires attached. The bottom-left photo shows a man in a white shirt sitting in a chair, with a complex apparatus mounted on a stand in front of him, which includes a microphone and various tubes. The right photo shows a man wearing a headband with multiple sensors or electrodes attached to his forehead and hairline, along with other equipment around his neck and chest.

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35

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Thank you for your attention

The slide features three logos. On the left is the logo for Université de Provence Aix-Marseille 1, featuring a red and yellow heraldic shield above the text "UNIVERSITÉ DE PROVENCE" and "Aix - Marseille 1". In the center is the logo for UMR 6057 CNRS Parole et Langage, which includes a stylized black 'P' and 'L' icon followed by the text "UMR 6057 CNRS PAROLE ET LANGAGE". On the right is the circular logo for CNRS in blue, with the letters "cnrs" written in a white serif font.

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36