Stuttering or logoneurosis - a new approach in therapy tactics

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Stuttering is a violation of the tempo-rhythmic organization of speech, in which interruption occurs much more often than on average in most people. Stuttering is often accompanied by tension and anxiety. In this case, repetitions of sounds, syllables, blocks of silence, unnatural stretching of sounds, facial grimaces and tics are possible [1, 2].

On average, the frequency of stuttering occurs in 0.5-10% of cases in the general population and represents a rather serious psycho-social problem.

Many children between the ages of two and five go through a natural period of fluent speech. It is assumed that the reason for the lack of fluidity of speech may be a combination of natural processes of speech development, the development of motor control of speech, and stresses associated with the child's social environment.

There are many theories about the causes of stuttering: constitutional, environmental and communication. There are known facts indicating a genetic predisposition to stuttering. In some cases, stuttering is interpreted as a complex neurotic disorder, which is the result of an error in the nervous processes in the cerebral cortex, a violation of the cortical-subcortical interaction. It was revealed that the cause of stuttering is in a violation of the coordination of the movement of speech muscles, a violation of feedback with the help of hearing, or insufficient control of the speech function by the central nervous system. On the basis of positron emission tomographic scanning and neurophsiological studies of brain activity, it was revealed that in those who stutter during speech, the dominant left hemisphere cannot sufficiently steadfastly fulfill its leading role in relation to the right hemisphere.

The study of attention, memory, thinking, psychomotor skills in stuttering showed that they have changed the structure of mental activity, its self-regulation.

There are as many approaches to treating stuttering as there are theories about its causes. They can be summarized in the main areas: trainings aimed at eliminating stress at different social levels, conducting speech therapy classes to teach fluency of speech, drug treatment - correction of phobias, metabolic and nootropic therapy. It is impossible to diminish the significance of any of the existing directions, since the complex the approach always gives a greater effect than the use of one way techniques. In of treatment depends on the age of the patient and the disease. duration One thing is clear that there is no single "cure" for stuttering.

In experimental and clinical practice laboratories pathophysiology MONIKI studied the possibilities of the therapeutic effect of weak electromagnetic fields during stuttering in children. According to a number of authors, this effect is based on the mechanism of normalization of homeostasis when electromagnetic oscillations of a certain frequency enter resonance with

regulatory systems of the body (neuro-immuno-endocrine) [4, 5, 6]. Recently, in Russia and abroad, a large number of devices and hardware-software complexes have been created to implement such an impact [6]. One of such devices is MINI-EXPERT-DT, developed by the Center for Intelligent Medical Systems IMEDIS. A number of studies have shown the clinical efficacy of its use in the treatment of

common pathological conditions. However, in the available literature, we were unable to find works devoted to the study of the effectiveness of induction electromagnetic exposure in children with stuttering problems. In connection with an unfinished clinical study, the article presents individual clinical cases of the treatment of stuttering.

Clinical case 1

Patient N, 5 years old. Stuttering developed after visiting kindergarten, in the evening of December 2, 2005, there was a pronounced violation of speech (repeated repetition of letters, syllables of short words). From the words of the mother, until the last event, the child spoke with minor speech therapy defects according to his age, the speech was developed with the correct structure of the phrase, without long interruptions. The pediatrician recommended: consultations of a psychologist, speech therapist, termination of visits to preschool institutions, neurophysiological studies (EEG, Echo-eg). The EEG showed: “The cortical rhythm is not formed, disorganized. Signs of activity of stem structures, epic activity were not revealed. " Consulted by a neurologist. Diagnosis: “Neurotic reactions. Logoneurosis ". Recommended Novopassit, Elkar, Neurokhel according to age-appropriate schemes. During 4 weeks of treatment and classes with a speech therapist in teaching fluent speech, no obvious dynamics were revealed. When testing on the device "MINI-EXPERT-DT", it was determined
psycho-vegetative load 4 tbsp., the greatest decrease in the measuring level was given by Bach Flowers for "fears". When selecting an induction program, the Stress I program was tested. The first session of induction therapy made it possible to almost completely restore speech to a good state; the child underwent a second session a week later. Further use of Bach colors and grains with recording of the frequencies of the induction program is recommended. Conclusion of a speech therapist: "Speech is formed according to age." The child is under observation with a positive follow-up, according to the mother, "he remembers poetry much faster."

Clinical case No. 2

Patient A, 6 years old. Was observed in the neurological department with a diagnosis of nocturnal epilepsy, which differentiated with a diagnosis of nocturnal myoclonus, concomitant diagnoses - enuresis. logoneurosis. EEG data “Expressed disorganization of cortical rhythmics. Pronounced activity of stem structures. No daytime epiativity was detected. " Sick
he was consulted by the MONIKI homeopath and a set of electronic copies of the preparations made by Heel, OHOM, manufactured on the IMEDIS equipment, was prescribed. Within 10 days of use, the patient decreased the frequency of bedwetting from 3-4 times per night, to several "dry" nights. Application of the program "Stress I", selected by a logical way without testing on the software package,

caused a deterioration in the child's condition after the first session: tearfulness, increased enuresis, increased logoneurosis. After 3 days, the patient underwent the program "Children's cerebral" with obvious positive dynamics. Conducting 3 sessions 1 time per week with the parallel appointment of electronic copies of the program and complex homeopathic remedies contributed to the reduction of urination to 1-2 nights of uncontrolled urination per week with a positive dynamics of recovery of logoneurosis. EEG dynamics “Signs of cortical rhythm formation. Stem structures remain active. No daily epi activity was detected. " The child is under dynamic observation, with positive dynamics of treatment.

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