

Speech motor planning: Evidence from neurodegenerative disorder

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Introduction

- ❖ **Speech motor planning**: critical in speech production; take place after phonological/phonetic encoding and before speech motor execution.
- ❖ **Apraxia of speech (AOS)** is a disorder that affects speech motor planning → distorted speech sounds, substitutions, insertions, inconsistent errors, groping behaviors, and deviations in tone, stress, or rhythm.
- ❖ AOS: typically co-occurs with aphasia (higher-level language disorder) and dysarthria (motor execution disorder).
- ❖ However, there is **no consensus in the neural substrates** underlying speech motor planning.
 - Post-stroke AOS: associated with lesions to left precentral gyrus (PrCG) (Basilakos et al, 2015, 2018; Takakura et al., 2019).
 - Neurodegenerative disease: left premotor cortex and supplemental motor cortex (Utianski et al., 2018; Cordella et al., 2019).
- ❖ The specific **processes** involved in speech motor planning are often **underspecified**.
- ❖ This study: investigated AOS in individuals with Primary Progressive Aphasia (PPA, a neurodegenerative disorder affecting language), a less studied population.
 - Address issues specifically concerning the PPA phenotypes, evaluate if more diffuse damage profiles can provide additional insights into the nature of the speech planning processes

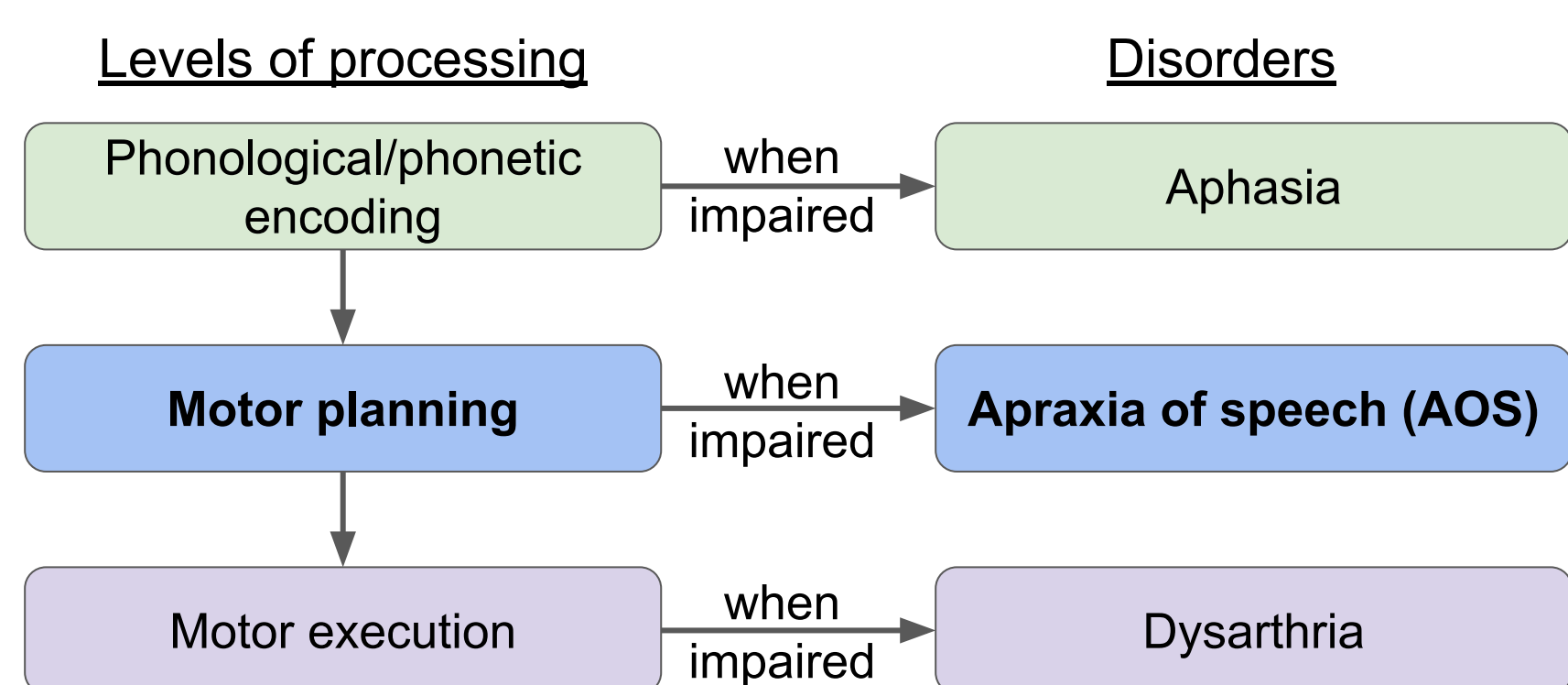


Figure 1. Processes and relevant disorders in speech production.

Research questions:

1. Which brain areas are uniquely associated with AOS in PPA?
2. What do the areas associated with AOS reveal about the specific processes that are impaired?

Methods

Participants: 34 PPA individuals (19 females; 12 lvPPA, 12 nvPPA, 7 svPPA, 1 mixed, 2 unclassifiable)

Data:

Variable	lvPPA (n = 12)	nvPPA (n = 12)	svPPA (n = 7)
Mean (SD)			
Age	66.75 (9.47)	67.58 (5.28)	65.14 (9.21)
Years of education	16.17 (2.89)	16.50 (2.43)	16.67 (1.03)
Years post onset	3.67 (2.45)	2.71 (1.64)	4.86 (3.13)
FTD-CDR	6.29 (3.17)	4.13 (3.16)	5.25 (3.08)

Table 1. Demographics of PPA participants.

- ❖ **Behavioral data**
 - **Oral picture naming:** Boston Naming Test (BNT; Williams et al., 1989)
 - **Single word repetition:** subtest 2 of Apraxia Battery for Adults (ABA2) (Dabul, 2000)
 - 20 triplets of words, such as “thick, thicken, thickening”
 - Length effect scores (difference in total item scores between the longest and shortest words in each triplet)

❖ **Speech language pathologist (SLP) ratings:** for **expressive aphasia**, **AOS**, and **dysarthria**

- Based on audio recordings of BNT, ABA2, and picture description
- Using an in-house scale of 0-3 (0 = absent, 3 = severe)

❖ **Neuroimaging:** T1-weighted MPRAGE structural scans

Analysis 1: Neural underpinnings of speech and language disorders

- ❖ Whole-brain voxel-based morphometry (VBM) on the T1-weighted images using FSL-VBM (Douaud et al., 2007) → identify voxels significantly correlated ($p < .05$) with each SLP ratings, controlling for the other two ratings
 - Correction for multiple comparison: permutation-based non-parametric testing using threshold-free cluster enhancement (TFCE)

Analysis 2: Relationship between volume of significant clusters and SLP ratings

- ❖ Multiple regression analysis → test if each cluster of significant voxels accounted for unique variance in SLP ratings
 - SLP ratings ~ cluster 1 volume + cluster 2 volume + ...

Analysis 3: Brain areas associated with length effect

- ❖ Multiple regression analysis → evaluate if length effects were uniquely associated with specific brain areas
 - length effect ~ cluster 1 volume + cluster 2 volume + ...

Results

Analysis 1: Neural underpinnings of speech and language disorders

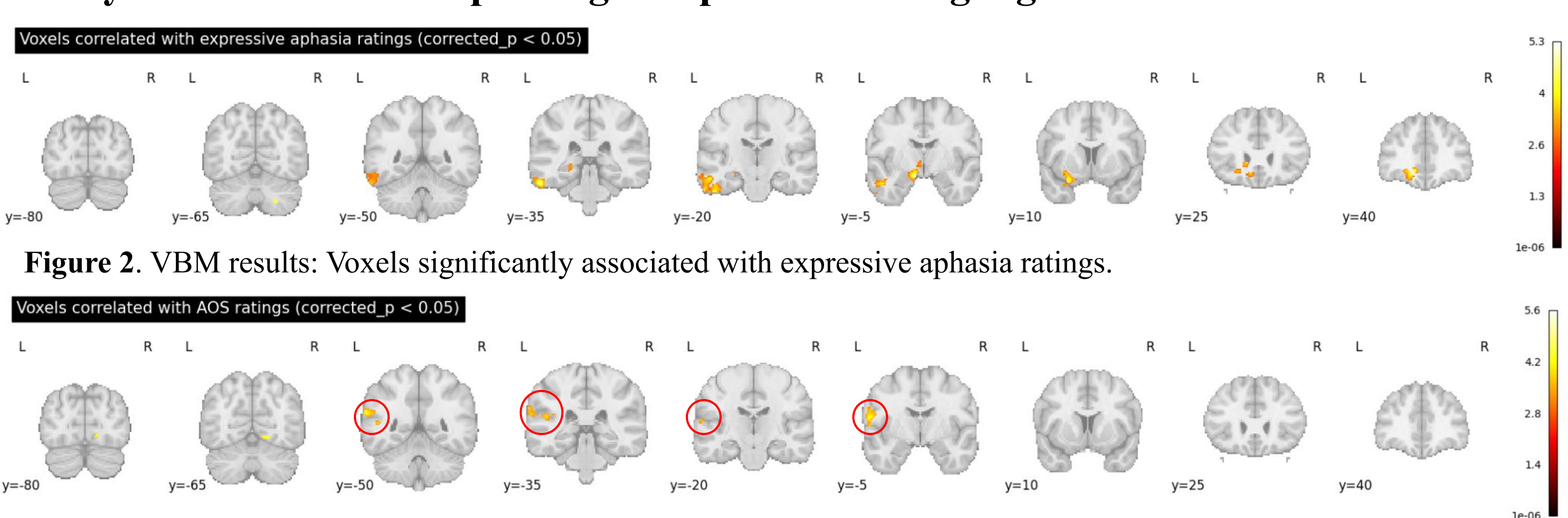


Figure 2. VBM results: Voxels significantly associated with expressive aphasia ratings.

Figure 3. VBM results: Voxels significantly associated with AOS ratings.

- ❖ **Expressive aphasia:** associated with bilateral, left-lateralized cortical volumes in the temporal lobes.
- ❖ **Dysarthria:** no voxels associated with dysarthria ratings at $p < .05$, likely due to small sample size (only 4 PPA participants with dysarthria diagnosis).
- ❖ **AOS:** associated with cortical volume in the **left PrCG**, postcentral gyrus (**PoCG**), supramarginal gyrus (**SMG**), and angular gyrus (**AG**).

Analysis 2: Relationship between volume of significant clusters and SLP ratings

- ❖ The sensorimotor PrCG/PoCG cluster ($p = 0.006$) and the parietal SMG/AG cluster ($p = 0.003$) both accounted for unique variance in AOS ratings, suggesting that **multiple processes** contribute to speech motor planning.

Analysis 3: Brain areas associated with length effect

- ❖ Length effect score (phonological working memory): associated with volume of the parietal cluster ($p = 0.003$) - **larger cortical volumes associated with smaller length effects**, but not with the sensorimotor cluster ($p = 0.598$).

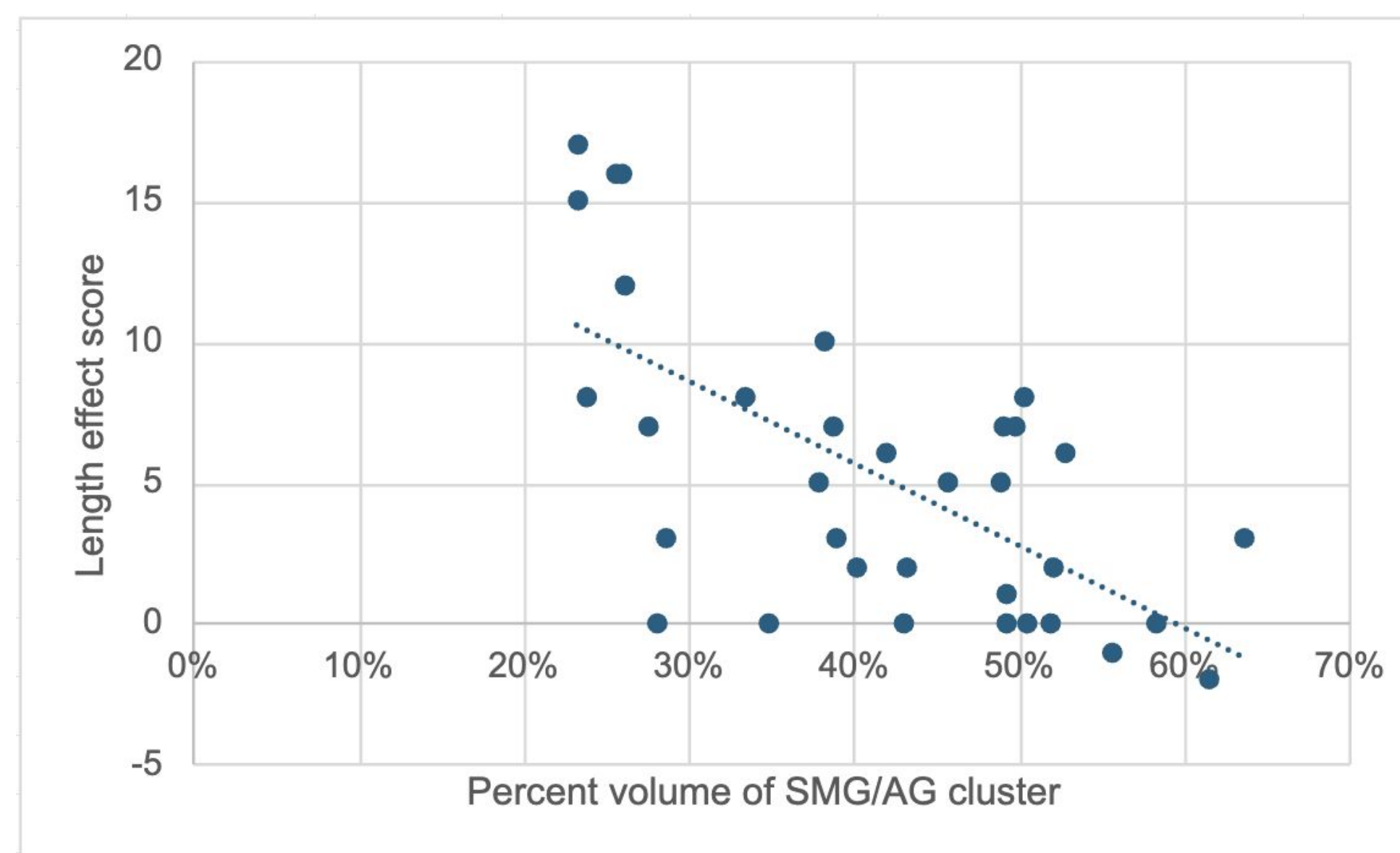


Figure 3. Volume of parietal SMG/AG cluster vs length effect scores.

Discussion

- ❖ AOS was significantly correlated with cortical volume in
 - left PrCG, the motor cortex.
 - left PoCG, the somatosensory cortex.
 - left SMG, associated with phonological WM.
 - left AG, associated with attentional control and serial order representation and processing.
 - The neural data indicates that speech motor planning consists of multiple dissociable sub-processes.
 - **Novel evidence of the role of SMG/AG in speech motor planning from PPA.**
- ❖ Phonological WM, as measured by length effect, was **uniquely** associated with the SMG/AG (and not sensorimotor areas).

Future directions

- ❖ Investigate the other processes that are involved in speech motor planning, in particular the one(s) supported by the sensorimotor cluster.
- ❖ Investigate whether if the phonological working memory involved in speech motor planning is input-/output-specific, using a picture naming task (output phonological WM) and a WM probe task (input phonological WM).

References

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