

PREFACE

All too often we wait to honor someone's work and accomplishments made over a career until the person is retiring or is leaving work for other reasons. We frequently neglect to show the appreciation we truly feel for years of dedication until those events remind us that we want to let the person know the impact of his life on our life. Breaking this tradition and honoring Dr. Russell J. Love for his 23 years of research, teaching, and patient care at Vanderbilt University gave all of his former and present students and colleagues great pleasure, because he continues to be a vital part of the faculty of the Division of Hearing and Speech Sciences. In this issue are papers that were presented at a conference held in Nashville, Tennessee, on June 29, 1991, to honor the work of Dr. Love.

The conference centered on clinical issues related to oral motor dysfunction in children and adults, because Dr. Love has devoted much of his career to patient care, research, and teaching in these areas. His abiding interest in the oral motor problems of children is evidenced in his recently published book, *Childhood Motor Speech Disability*.

A graduate of Northwestern University for both the master's and doctoral degrees, Dr. Love was highly influenced by the mentorship of Dr. Harold Westlake. After working as a speech and hearing therapist at Moody State School for Cerebral Palsied Children in Galveston, he served as staff clinician in the Cerebral Palsy Speech Clinic at Northwestern while completing his doctorate. He then turned his attention to the adult population while working as a speech pathologist at the Coral Gables Veterans Administration (VA) Hospital. From this experience came his other career-sustaining interest, neurogenic speech and language problems of adults. From the VA Hospital he returned to Chicago and served as consulting speech pathologist at Michael Reese Hospital while teaching at DePaul University.

In 1967 he accepted a position as Assistant Professor of Hearing and Speech Sciences at Vanderbilt University School of Medicine in Nashville and Chief Speech Pathologist at the Bill Wilkerson Hearing

and Speech Center. It is for his work here that he was recognized with the conference and celebration.

Though he is now Professor Love, he has maintained his interest and dedication to graduate students and serves as a model for other faculty and peers in promoting quality, accountability, and professionalism in training students. He has published numerous articles and book chapters as well as two books. He is a champion for the rights of handicapped individuals and is recognized nationally for his strong advocacy.

All of the articles contained in this issue of *Seminars* are based on papers presented at the conference, "Oral Motor Dysfunction in Children and Adults: A Conference and Celebration Honoring Dr. Russell J. Love." These particular authors were invited to speak because of their expertise in the assessment and treatment of patients with oral motor dysfunction. The conference was designed to address a broad array of topics concerning dysarthria and apraxia.

Rachel Stark, Beth Ansel, and Jennifer Windsor present data from a study on oral volitional movements of normal children. Their approach to assessing volitional movements and their findings concerning the silent, voiced, and voiceless conditions provide thought-provoking material for clinicians seeking to differentiate phonological disorders from apraxia in children. The preliminary data from this project hold much promise for future research.

Apraxia of speech in adults is discussed from the neurologist's point of view by Howard Kirshner of Vanderbilt University School of Medicine. Interesting questions arise from discussions in the literature regarding whether apraxia of speech is a motor speech disorder or a language disorder in most patients. Dr. Kirshner's thorough review of the literature and thoughtful analysis should stimulate more exacting assessments to support the diagnosis of apraxia of speech.

The contrasting and complementary nature of instrumental and perceptual

evaluations of patients with oral motor dysfunction is adeptly presented by Robert Orlikoff and Terry Wertz and John Rosenbek. Dr. Orlikoff reviews the available instrumentation and its use to evaluate, and also treat, disorders of ventilatory, laryngeal, and/or vocal tract functions. He sees the use of instrumentation in assessment and treatment as enhancing what clinicians do. This view is supported and expanded by Drs. Wertz and Rosenbek who discuss and teach where the ear fits in evaluating a patient's speech. They make a strong case with Dr. Orlikoff that the ear may be the "final arbiter" but that theory and practice will be improved by combining perceptual analyses with acoustic and physiological data.

Two of the biggest changes that speech-language pathologists, such as Dr. Love, who began careers in the 60s have seen are the development of augmentative/alternative communication systems for nonverbal patients and the evaluation and treatment of feeding and swallowing disorders of patients, with and without communication disorders. Joanne Robbins, who is well known for her research in dysphagia, discusses the impact of oral motor dysfunction on swallowing and the impact that speech-language pathology has had on the study of dysphagia and its evaluation and treatment. As Dr. Robbins notes, the field made significant contributions for patients who have no communication disorder, but whose oral-pharyngeal function is compromised for swallowing.

Mark Clark, who is currently completing his doctorate at the University of Tennessee, urges clinicians working with nonverbal clients to provide team-based assessments for selecting an alternative/augmentative system. He provides a useful and timely tutorial on how to structure an evaluation and how to choose team members. He cautions that an assessment should result in a description of the type of equipment the patient needs in terms of access, function, portability, and output features rather than naming a piece of equipment or vendor. Careful, patient-oriented assessment should be the mission

of every clinician working with clients with severely impaired oral motor function. Updating our assessments of those clients to appropriately utilize the technology of the 90s is the challenge that Mark Clark presents in his article.

I believe that readers will find that these authors have done an outstanding job. Their presentations at the conference and for this publication are evidence of the respect and appreciation that the profession accords Dr. Love. I am very pleased that we have been able to show Dr. Love the appreciation that he deserves and thank him for the years of service to students, peers, and the profession. I have listed below selected books, chapters, and articles concerned with oral motor dysfunction or rights of the handicapped that were written by Dr. Love. I hope that you will take an opportunity to read those that you may not have read previously.

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