

SHS 310 Case Study #3

Jason is a five and a half year old boy who underwent adenoidectomy about a year ago. Before the adenoidectomy, he had normal speech for his age. Since that surgery, he has experienced hypernasal speech and nasal air emission during the production of stops and fricatives. Because he has good movement of the lateral pharyngeal walls but poor contact of the velum with the posterior pharyngeal wall, his physician and speech pathologist are recommending pharyngeal flap surgery for Jason.

- Explain why Jason experienced velopharyngeal dysfunction following his adenoidectomy. Include a drawing (by your hand) of Jason's velopharyngeal closure before and after the adenoidectomy.
- Describe the assessments that are used to determine that Jason has velopharyngeal dysfunction. Include the perceptual assessments performed by the speech pathologist and the instrumental assessments (nasoscopy and videofluoroscopy).
- Describe the pharyngeal flap operation and list some potential postoperative complications. Is this surgical procedure likely to improve Jason's resonance balance and speech intelligibility?

Some helpful resources

- [Article on altered speech after adenoidectomy](#)
- [Article on management of velopharyngeal dysfunction](#)
- [Article on velopharyngeal insufficiency and videofluoroscopy](#)
- [Website on velopharyngeal dysfunction and nasoscopy](#)
- [Website on pharyngeal flaps for parents](#)
- [Website on resonance disorders and velopharyngeal dysfunction](#)