You most likely are interested in hearing what SpeechEasy Providers have to say about their clients’ experiences with SpeechEasy. The following are samplings of the testimonials and case studies we have received from our providers who have integrated SpeechEasy into their clinical practice.
“SpeechEasy is another tool in the SLP’s toolbox, just one more option for our clients. SpeechEasy will not replace traditional therapy. Many people who stutter find that SpeechEasy enables them to use the techniques learned in speech therapy with less effort. As an SLP dispensing SpeechEasy, I am very interested in working closely with the original SLP to ensure that therapy, if needed, is continuous and I fully support that SLP in any way that I can.”

CASE STUDY 1

SITUATION

The client is a 38 year old male, moderately severe stutterer, previously a bartender and now employed as a car salesman in Birmingham, AL. The client’s father and grandfather stuttered until about 10 years of age. The client participated in a specialized three-week stuttering program several years ago that yielded poor results.

Prior to obtaining the SpeechEasy device, the client had difficulty communicating with customers and talking on the phone. Specifically, the client demonstrated part-word repetitions, prolongations, and silent and voiced blocks

The client contacted this providing SLP for an evaluation. The client was considered a good SpeechEasy candidate given previous therapy experience.

RESULTS

The client experienced the following immediate results with SpeechEasy:

STUTTERED SYLLABLES

Conversation

Without SpeechEasy, 15 percent; with SpeechEasy, 2 percent

Reading

Without SpeechEasy, 8 percent; with SpeechEasy, 2 percent
Elimination of Secondary Characteristics (eyes closing, mouth contortions)

Long-term results have been good, although not as good as during initial fitting. The client wears his SpeechEasy to work everyday and in social situations. The client reported missing his SpeechEasy when it had to be sent in for repairs.

CASE STUDY 2

SITUATION

The client is a 43 year old female, moderate to severe stutterer, employed as a receptionist / assistant in a hospital setting in Birmingham, AL.

Prior to obtaining the SpeechEasy device, the client exhibited silent blocks, part-word repetitions, and secondary characteristics, such as eyes closing and mouth contortions. The client reported difficulty in paging individuals on the PA system at work and answering the phone.

This providing SLP considered the client a good SpeechEasy candidate given previous speech therapy completed as a teenager as well as the client’s job situation and high level of motivation.

RESULTS

The client experienced the following immediate results with SpeechEasy:

STUTTERED SYLLABLES

Conversation

Without SpeechEasy, 37 percent; with SpeechEasy, 1 percent

Reading

Without SpeechEasy, 3 percent; with SpeechEasy, 0 percent

The client later reported some difficulty initiating speech. The providing SLP recommended utilizing the “uh” vowel as a starter device, which produced good results for the client.
COMMENTARY & CASE STUDIES FROM
BONNIE MCKENZIE, M.S., CCC-SLP
MCKENZIE CENTER FOR SPEECH & LANGUAGE
ST. LOUIS, MO

“I have found SpeechEasy to be a useful tool for many people who stutter. I ask people to rate improvement on a scale of 0 to 10, with “0” meaning “No Improvement” and “10” meaning “Miracle / No Stuttering” and I always explain it’s not a miracle; it’s not a cure. I have seen “9”s; lots of “5”s, “6”s, and “7”s, and some “0”s. For many who had improvement in the 5 to 9 range, learning techniques along with the device helped a lot!”

CASE STUDY 1

SITUATION

The client is a 24 year old female employed as a substitute teacher.

Prior to obtaining the SpeechEasy device, the client reported difficulty speaking on the phone, talking to authority figures, and during job interviews. The client also reported heightened speech fear and anxiety in these situations. Silent blocks and repetitions were observed at presentation.

RESULTS

The client experienced the following immediate results with SpeechEasy:

STUTTERED SYLLABLES

Conversation

Without SpeechEasy, 15; with SpeechEasy, 1 to 4

Reading

Without SpeechEasy, 5; with SpeechEasy, 0

This providing SLP demonstrated techniques to assist the client in smoothing out speech, initiating words more easily, and enhancing speech naturalness. During initial months of SpeechEasy use, the client rated her speech an “8” on a scale of 0 to 10, with “0” indicating “No Improvement” and “10” indicating “No Stuttering Whatsoever”. Following one year of SpeechEasy use and ongoing therapy, the client rated her speech a “9” and indicated improvements in confidence in situations previously perceived as difficult. The client reports being able to wear the SpeechEasy device less - while still maintaining control of her fluency.
CASE STUDY 2

SITUATION

The client is a 35 year old female homemaker who presented to this providing SLP with severe stuttering characterized by blocking, breath holding, and multiple inhalations while attempting to initiate voice. Prior to obtaining the SpeechEasy device, the client indicated that stuttering interfered with all aspects of life despite previous efforts with speech therapy, including PFSP. The client specifically reported difficulty transferring control into everyday speech and maintaining improvements.

RESULTS

The client experienced the following immediate results with SpeechEasy:

STUTTERED SYLLABLES

Conversation

Without SpeechEasy, 10; with SpeechEasy, 0

Speaking Rate

Without SpeechEasy, 110; with SpeechEasy, 117

During initial months of SpeechEasy use, the client reported significant improvements in all situations and rated her speech a “9” on a scale of 0 to 10, with “0” indicating “No Improvement” and “10” indicating “No Stuttering WHATSOEVER”. The client’s results dissipated over 14 months, but immediately improved following practice sessions with the providing SLP and adjustments to SpeechEasy device settings.
“SpeechEasy is another tool in the SLP’s toolbox, just one more option for our clients. SpeechEasy will not replace traditional therapy. Many people who stutter find that SpeechEasy enables them to use the techniques learned in speech therapy with less effort.

As an SLP dispensing SpeechEasy, I am very interested in working closely with the original SLP to ensure that therapy, if needed, is continuous and I fully support that SLP in any way that I can.”

CASE STUDY 1

SITUATION

The client is a 35 year old male, severe stutterer, working in the field of marketing. The client reports having a cousin that also stutters. The client has had traditional therapy beginning at the age of three. He received direct therapy services three times weekly during the school year from the age of five through twelve. His used an Edinburgh Masker for approximately one year, when he was twelve years of age. He received psychological therapy to treat his anxiety regarding his dysfluencies when he was fifteen years old. This client participated in the “Stutter No More” program with Dr. Martin Schwartz at the age of twenty-eight. He attended the Hollins Intensive Program at the age of thirty. He reports having used various anti-anxiety drugs in the past and was presently taking one at the time of the evaluation.

Prior to obtaining the SpeechEasy device, the client had difficulty communicating with customers, participating in business meetings and using the telephone in all situations. He expressed concern that his dysfluencies were hindering his job performance.

Upon an evaluation for the SpeechEasy device, it was determined that this client was an excellent candidate given his prior therapy experiences and motivation.

RESULTS

The client experienced the following immediate results with the SpeechEasy:

STUTTERED SYLLABLES

Conversation
Without the SpeechEasy, 32%, with SpeechEasy, 18.3%

Reading

Without the SpeechEasy, 16%, with the SpeechEasy, 2.6%

Also noted was a decrease in the physical struggle that was visibly evident during dysfluencies and the shortened length of his dysfluencies.

Long-term results have been excellent. The client telephoned me several months after using the device to state that he now refers to it as “SpeechMiracle” versus SpeechEasy.

CASE STUDY 2

SITUATION

The client is a nine year old male, moderate stutterer, with no family history of dysfluencies. This client has attended biweekly speech therapy sessions with a school clinician for the past several years.

Prior to obtaining the SpeechEasy device, his dysfluencies consisted of part-word repetitions, prolongations and silent blocks without secondary characteristics. The client’s mother reported that the client participates in class however he is very dysfluent when speaking in front of peers.

She stated that his dysfluencies increased when he missed several therapy sessions due to holidays, summer break, etc…

Upon evaluation, it was determined that this client would be a good candidate for the SpeechEasy device given his understanding of traditional therapy techniques.

RESULTS

The client experienced the following immediate results with the SpeechEasy device:

STUTTERED SYLLABLES

Conversation

Without SpeechEasy, 17%; with SpeechEasy 6%

Reading
Without SpeechEasy 10%; with SpeechEasy, 2%

Long-term results have been excellent. The child continued to receive speech therapy services from the school clinician on a consultative basis for the first three months after receiving the SpeechEasy device. He has since been exited from the SLI program and continues to exhibit consistent fluency within the normal limits.
The client J. is a 12 year old youth. His development was normal in every way except for speech which was somewhat delayed. By two and a half years his speech “caught up” except that he exhibited beginning stuttering and articulation difficulty with /k/ and /g/. By the age four his stuttering became less typical and he demonstrated pitch changes, hard blocks, and word avoidance. J. has received therapy since age four and been treated by a highly experienced and well regarded fluency specialist for most of this time. The young man, his parents, and his speech-language pathologist agree that has made significant progress but still cannot manage his speech as well as he would like.

The client is an excellent student. He is proactive about taking part in special school activities such as science fairs. The client presented as a mature for his age, articulate, and quietly engaging. He voiced positive attitudes about his speech and appears highly motivated to continue to improve his fluency. It was noted that he has very good eye contact even when he blocks. The family unit appeared to be exceptionally strong and supportive.

During the fitting we settled on a setting prescription of 60 ms delay and an upward frequency shift of 500 Hz. J.’s speech was rated using a modification of the Stuttering Severity Instrument. See the chart below for a comparison of his fluency without and with the SpeechEasy.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Reading</th>
<th>Monologue</th>
<th>Longest Block Avg.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base line</td>
<td>16% syllables stuttered</td>
<td>38% syllables stuttered</td>
<td>2 seconds</td>
</tr>
<tr>
<td>Wearing SpeechEasy</td>
<td>5% syllables stuttered</td>
<td>19% syllables stuttered</td>
<td>2 seconds</td>
</tr>
</tbody>
</table>

Stuttering events were mostly single component, though in the baseline condition he demonstrated several more complicated blocks including 3 repetitions of an initial sound + prolongation.

J. had no physical concomitants other than facial tension in either condition.

The quality of stuttering moments in the monologue condition is summarized below.

**BASELINE:**
Interjection - 30%  
tense pause - 25%  
phrase repetition - 5%  
phoneme repetition - 20%  
prolongation - 20%  

**WEARING SPEECH EASY:**

tense pause - 75%  
prolongation - 20%  

The client was coached in using active techniques to enhance the benefit of the SpeechEasy; specifically, he was shown how to focus on stretching the first vowel to consonant or consonant to vowel transition in a phrase. This was emphasized because of his success and experience with Easy Relaxed Approach, Smooth Movement (ERASM) which was a tool practiced in his therapy program.

The client was interviewed by telephone approximately 22 months after receiving his device. He stated that he wears the SpeechEasy and “some of the time” at school. He does not like to wear it in the cafeteria, for example, because of noise. He stated that he particularly likes to use it for presentations. He stated the major benefit of the device is that it reminds him to use techniques learned in therapy and makes it easier for him to do so. He has won several science fair competitions. He did not have his device for one of these as it was in the lab for repair. His mother stated that he took care to remember he was capable of doing well for his presentation with or without his SpeechEasy.
CASE STUDY 1

SITUATION

The client is a 30-year-old male, severe stutterer, who works as a radiology technician at a large hospital in Miami, Florida. The client’s uncle (paternal) was also a severe stutterer. The client has received speech therapy “off and on” during elementary school, high school and as a young adult (approximately 12 years ago).

Prior to obtaining the SpeechEasy device, the client had difficulty speaking on the phone, speaking with his administrators and speaking to hospital patients. Specifically, he demonstrated tonic blocks that lasted 4-5 sec., repetitions, prolongations and facial contortions as well as movement of the lower extremities during stuttering events.

RESULTS

The client experienced the following immediate results with SpeechEasy:

STUTTERED SYLLABLES

Conversation

Without SpeechEasy, 35%; with SpeechEasy, 5%

Reading

Without SpeechEasy, 28%; with SpeechEasy, 3%
CASE STUDY 2

SITUATION

The client is a 14-year-old male who is in the 9th grade at a private school in West Fort Lauderdale, Florida. The client lives with his mother and brother. His father lives overseas but visits frequently. The client speaks two languages, English and Papiamento. He is a severe stutterer.

Prior to obtaining the SpeechEasy device, the client reported difficulty when speaking with his peers, during oral reading in school and when asked to present reports or answer questions orally in school. He exhibited silent blocks (2-3 seconds) at the outset of phrases, voiced blocks, phonemic and part-word repetitions, and secondary characteristics such as closing his eyes, lip pressing, glottal fry and movement of the extremities.

According to the client’s mother, he received speech therapy since elementary school with “one to two year breaks in between when we saw he was tired”. His last round of therapy was approximately one year ago. He recently started receiving therapy in school and it was the school speech pathologist that brought SpeechEasy to the parents’ attention.

RESULTS

The client experienced the following immediate results with SpeechEasy:

STUTTERED SYLLABLES

Conversation

Without SpeechEasy, 36%; with SpeechEasy, 8%

Reading

Without SpeechEasy, 21%; with SpeechEasy, 3%

This client continued to experience difficulty initiating phrases. The used of vocalizations such as “uh” and “mmm” were demonstrated as “starter” techniques. He was able to return demonstration easily with good results in conversation.
“SpeechEasy® is another tool in the SLP’s toolbox and another option for our clients. The SpeechEasy® Fluency Device does not replace traditional therapy. Many people who stutter find that SpeechEasy® enables them to use the techniques learned in speech therapy sessions with less effort.

As an SLP dispensing SpeechEasy®, I am committed to working closely with the referring SLP to ensure that the client continues to receive therapy as needed. I support the client returning to his or her SLP for supplemental therapy to stabilize their strategies and maintain fluency.”

**CASE STUDY 1**

**SITUATION**

The client is a 17 year-old male high school junior. My initial telephone screening questions with his father revealed the client had a history of cerebral palsy since birth and “has stuttered for as long as I can remember”. He walks with the aid of crutches and a walker. He reported having been enrolled in fluency therapy for his stuttering for more than one year at a regional rehabilitation center, focusing on “taking deep breaths” before he talks. His parents heard about the SpeechEasy® Fluency Device from a family friend who had used the device successfully for two years.

The client requested a SpeechEasy® evaluation “so I can talk better to others and won’t be embarrassed.” His parents observed the evaluation process, and were visibly moved by the positive difference they heard in his speech. His father stated, “If he can experience even 50% improvement, it will be worth the cost.”

Due to the client’s learned habit of “taking a deep breath” and holding it before speaking, the majority of the evaluation process involved focusing on exhalation rather than inhalation. The Initial Vowel Words and Phrases list was used to introduce and practice silent breathing and “tired talking”.

**RESULTS**

Results of his evaluation process, as suggested by behavioral observations and measured by the Riley Stuttering Severity Instrument, indicated very severe stuttering without the SpeechEasy® and mild stuttering with the device:
STUTTERING FREQUENCY:

Conversation

Without SpeechEasy: 28%; with SpeechEasy: 5%

Reading

Without SpeechEasy: 35% percent; with SpeechEasy: 9%

DURATION OF BLOCKS:

Without SpeechEasy: 9 seconds; with SpeechEasy: 1 second

A copy of the Initial Vowel Words and Phrases list was provided to the client to continue practicing at home until he received his SpeechEasy®. Three weeks later, when he returned for his final fitting, his stuttering frequency and blocks were less than his pre-SpeechEasy® results more than his post-results. His father reported that, during the long drive home following the evaluation, the client demonstrated more fluent speech by using the strategies learned in the evaluation session. His fluency decreased, however, after a few weeks. During his final fitting, with the use of the exhalation strategy and the SpeechEasy®, his dysfluency frequencies decreased to 2% in conversation and fleeting hesitations rather than blocks. I referred him to his Speech Pathologist for continued therapy, and spoke with her to discuss continuing the strategy that enhances his fluency.

He has maintained his post-fitting fluency for two months, and credits the device, his weekly speech therapy and his daily practice with the Initial Vowel Words and Phrases.

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CASE STUDY 2

SITUATION

The client is a 19 year old male with severe dysfluencies. He was referred for a SpeechEasy® one year ago by his public school Speech-Language Pathologist, who described the client as an outstanding student whose stuttering prevents him from speaking in class. She further reported that his stuttering severely interfered with his school achievement, and was “preventing him from applying for a college scholarship.”

Prior to obtaining the SpeechEasy device, the client exhibited voiced blocks, part-word repetitions, and secondary characteristics of hand movements, eye blinks, and jaw movement contortions. The client reported choosing to take lower grades rather than verbally participate in class.

RESULTS

Results of his evaluation process, as suggested by behavioral observations and measured by the Riley Stuttering Severity Instrument, indicated very severe stuttering without the SpeechEasy® and mild stuttering with the device:
STUTTERING FREQUENCY:
Conversation
Without SpeechEasy: 25%; with SpeechEasy: 1%

Reading
Without SpeechEasy: 30% percent; with SpeechEasy: 2%

DURATION OF BLOCKS:
Without SpeechEasy: 5 seconds; with SpeechEasy: fleeting hesitations

A copy of the Initial Vowel Words and Phrases list was provided to the client to continue practicing at home until he received his SpeechEasy®. I hadn’t talked with this client until he attended our recent SpeechEasy Fluency Group Meeting. He reported to the group that his speech had become so fluent after six months of wearing the SpeechEasy®, that he decided he would leave it home while he was out of the country for two months. He admitted his speech “began to fall apart after the first month”. When he returned home, he forgot about his daily practice and had difficulty speaking even when wearing the device. After the group meeting, we had a brief therapy session with the device, and he was back on track with his fluency. In our phone conversation this week, he continued to demonstrate 99% fluency after one year of wearing the SpeechEasy® I recommended speech therapy on a monthly basis.
CASE STUDY 1

SITUATION

The client is a 14 year old, eighth grade male who would be considered to be a moderate stutter. The client’s father indicates that he was also a stutter and, at this point, is able to control his fluency by word circumlocution. This 14 year old has received traditional speech therapy from preschool into eighth grade and is currently receiving services. He states that he avoids talking in class, avoids phone calls, making class presentations and ordering food in restaurants. It is felt that his reluctance to participate in classroom activities and presentations is affecting his academic performance.

The family was referred for a SpeechEasy evaluation by the public school speech pathologist and by their neighbor who is also a speech pathologist. The client was considered to be a very good SpeechEasy candidate secondary to his age, the length of his previous traditional therapy experience and his desire to perform better in school.

RESULTS

Client experienced the following results with the SpeechEasy device:

STUTTERED SYLLABLES

Conversation

Without SpeechEasy, 26 percent; with SpeechEasy, 8 percent

Reading

Without SpeechEasy, 18 percent; with SpeechEasy, 1.57 percent

As can be seen from the initial results, the client had a greater improvement in his fluency in the reading situation than he did in general conversation. It should be noted, however, that the type of dysfluency changed with the use of the SpeechEasy so that those dysfluencies were most consistently very slight initial sound prolongations with the elimination of most initial sound and word repetitions, interjections and hesitations. It was discussed with the family that it would be appropriate and
advisable that the client would benefit from continued work with his school speech pathologist with
the use of the SpeechEasy device. This could be coordinated between this examining speech
pathologist and the public school speech pathologist.