

Critical Review:
Melodic Intonation Therapy: The Influence of Pitch and Rhythm on Therapy Outcomes

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Melodic Intonation Therapy (MIT) involves involves patients with nonfluent aphasia

Results

Nonrandomized Control Study

Stahl et al. (2013) conducted a nonrandomized control study. A total of 15 patients with chronic non-fluent aphasia were systematically assigned to one of three different treatment groups based on the following criteria: clinical diagnosis (Broca's or global aphasia) (each treatment group had 2 patients with Broca's aphasia), severity of affiliated apraxia of speech, age, and gender. None of the patients had any previous musical training or experience in singing. The researchers compared the production of 15 sentences in the following three treatment groups: (1) **Singing therapy (pitch + rhythm)**, which involved intense training of the sentences by singing them to a well-known melody, (2) **Rhythmic therapy (rhythm only)** which involved training using the same lyrics, but rhythmically speaking the sentences with natural prosody instead of singing them, and (3) **Standard therapy (control group, no pitch or rhythm)** which involved speech therapy that did not include singing or rhythmic speech. Data was collected before treatment and after 6 weeks of treatment. Two speech-language pathology students (who were naive to the experiment) independently rated the articulatory quality (percentage of correct syllables) of the produced sentences based on digital sound files, with two raters for each patient. In addition to assessing performance on the 15 sentences trained sentences, performance on untrained sentences was also assessed.

The scores from the two students were averaged for each patient, and appropriate statistical analyses were

performed to analyze the data. The results of the analyses are presented in Table 1.

However, the study also provides suggestive evidence that both rhythm and pitch may be key elements

speech is arguably one of the most important speech