

iCAHE JC Critical Appraisal Summary

Journal Club Details

Journal Club location	NALHN Speech Pathology
JC Facilitator	Josie Kemp
JC Discipline	Speech Pathology
CAT completed by:	MC

Question

Not included

Review Question/PICO/PACO

P: People with a neurogenic stutter/dysfluency (as opposed to a psychogenic stutter/dysfluency)

I: Current best practice/evidence-based stuttering/dysfluency treatment

C: No intervention (or standard treatment)

O: Improved speech fluency (or reduced stuttering/dysfluency)

Article/Paper

Cruz, C., Amorim, H., Beca, G. and Nunes, R., 2018. Neurogenic stuttering: a review of the literature, *Revista de Neurología*, vol. 66, pp. 59-64.

Please note: due to copyright regulations CAHE is unable to supply a copy of the critically appraised paper/article. If you are an employee of the South Australian government you can obtain a copy of articles from the [DOHSA librarian](#).

Article Methodology:

Literature review



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CONTACTS

www.unisa.edu.au/cahe
 iCAHE@unisa.edu.au
 Telephone: +61 8 830 22099
 Fax: +61 8 830 22853

University of South Australia
 GPO Box 2471
 Adelaide SA 5001
 Australia

CRICOS Provider Number
 00121B



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Ques No.	Yes	Can't Tell	No	Comments
1	✓			<p>Did the review address a clearly focused question?</p> <p>To assemble new insights regarding the epidemiology, pathophysiology, diagnosis, evaluation and treatment of neurogenic stuttering.</p>
2	✓			<p>Did the authors look for the appropriate sort of papers?</p> <p>A review of the literature was performed using PubMed and Scopus data bases. The included search term was 'neurogenic stuttering'. All published articles between 2000 January and 2016 September were included. Articles published in English and Portuguese languages were included.</p> <p><i>Only included one search term 'neurogenic stuttering' but given the broad enquiry of the question this is appropriate. However, are there other terms or synonyms for neurogenic stuttering that could have been included?</i></p> <p>Is it worth continuing?</p> <p>YES</p>
3		✓		<p>Do you think the important, relevant studies were included?</p> <p>Neurogenic stuttering is a rare phenomenon [6]. The incidence is not well established, since the majority of the published articles consists in case reports or small case series [1,3,10]. However, its low incidence has been questioned, since it appears to occur more frequently in clinical practice settings [11-13].</p> <p><i>Plausible that only including 'neurogenic stuttering' missed other relevant articles. Given the rarity of the condition, it is also likely that the sourced articles are a good representation of relevant articles. The omission of an inclusion criteria also weakens confidence that relevant, important studies were included.</i></p>
4			✓	<p>Did the review's authors do enough to assess the quality of the included studies?</p> <p><i>No critical appraisal of included articles.</i></p>
5		N/A		<p>If the results of the review have been combined, was it reasonable to do so?</p> <p><i>Results have not been combined. Results are discussed under the headings 'Epidemiology', 'Pathophysiology', 'Differential Diagnosis', 'Evaluation' and 'Treatment'.</i></p>

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6			<p>What are the overall results of the reviews?</p> <p>Neurogenic stuttering is a rare disorder whose epidemiological incidence is yet not fully established. It can be caused by several neurological disorders and several lesion locations. Despite recent advances, a single underlying pathophysiologic mechanism that fully explains neurogenic stuttering has still not been identified. Neurogenic stuttering has its own characteristics, however, the differential diagnosis with psychogenic stuttering or developmental stuttering may be difficult to accomplish based only on speech characteristics. Other language/speech disorders of neurological origin may coexist, and sometimes it is hard to establish well defined boundaries between different entities. Currently, there is no drug with proven efficacy in neurogenic stuttering treatment. Neurogenic stuttering treatment is based in the traditionally strategies used in developmental stuttering, namely a specific and individualized intervention by speech therapy. Further studies with exclusively neurogenic stuttering patients, may help to better clarify the pathophysiologic mechanisms underlying this entity and open doors to new treatment possibilities.</p>
7			<p>How precise are the results? <i>Not appropriate. Lack of any critical appraisal (e.g. identification of level of evidence) of the included articles may prompt questioning of the authors' summary.</i></p>
8		Journal Club to discuss	<p>Can the results be applied to the local population? Choose relevant context issues. The following are only suggestions to prompt discussion.</p> <p>CONTEXT ASSESSMENT</p> <ul style="list-style-type: none"> - Infrastructure - Available workforce (? Need for substitute workforce?) - Patient characteristics - Training and upskilling, accreditation, recognition - Ready access to information sources - Legislative, financial & systems support - Health service system, referral processes and decision-makers - Communication - Best ways of presenting information to different end-users - Availability of relevant equipment - Cultural acceptability of recommendations <p><i>Others</i></p>
9			<p>Were all important outcomes considered?</p>
10			<p>Are the benefits worth the harms and costs?</p>
11			<p>What do the study findings mean to practice (i.e. clinical practice, systems or processes)?</p>
12			<p>What are your next steps? ADOPT, CONTEXTUALISE, ADAPT</p> <p>And then (e.g. evaluate clinical practice against evidence-based recommendations; organise the next four journal club meetings around this topic to build the evidence base; organize training for staff, etc.)</p>
13			<p>What is required to implement these next steps?</p>

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