

PARIS 3

## RESPIRATION IN SPEECH: CONTROL, GLOBAL AND LOCAL EFFECTS

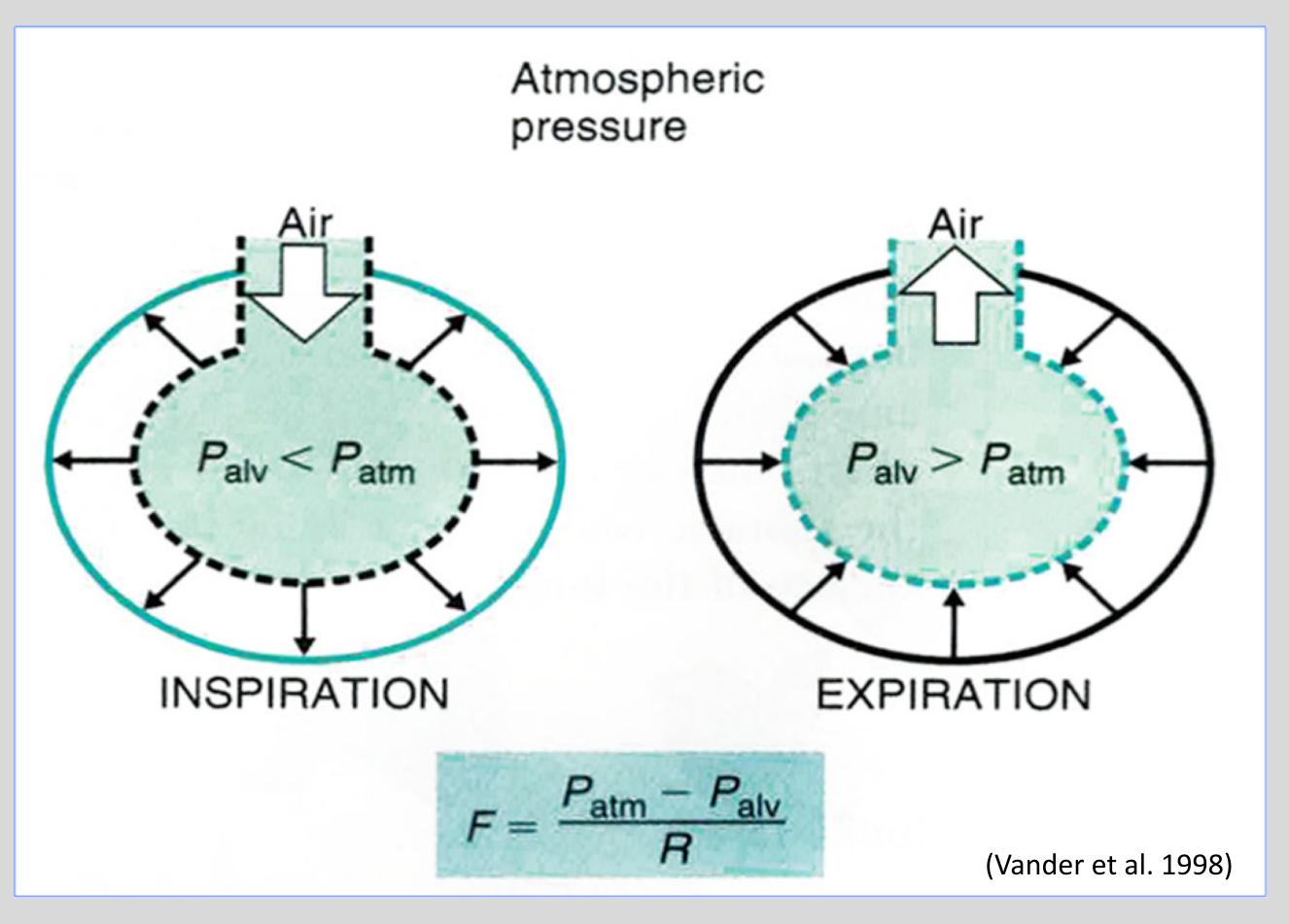


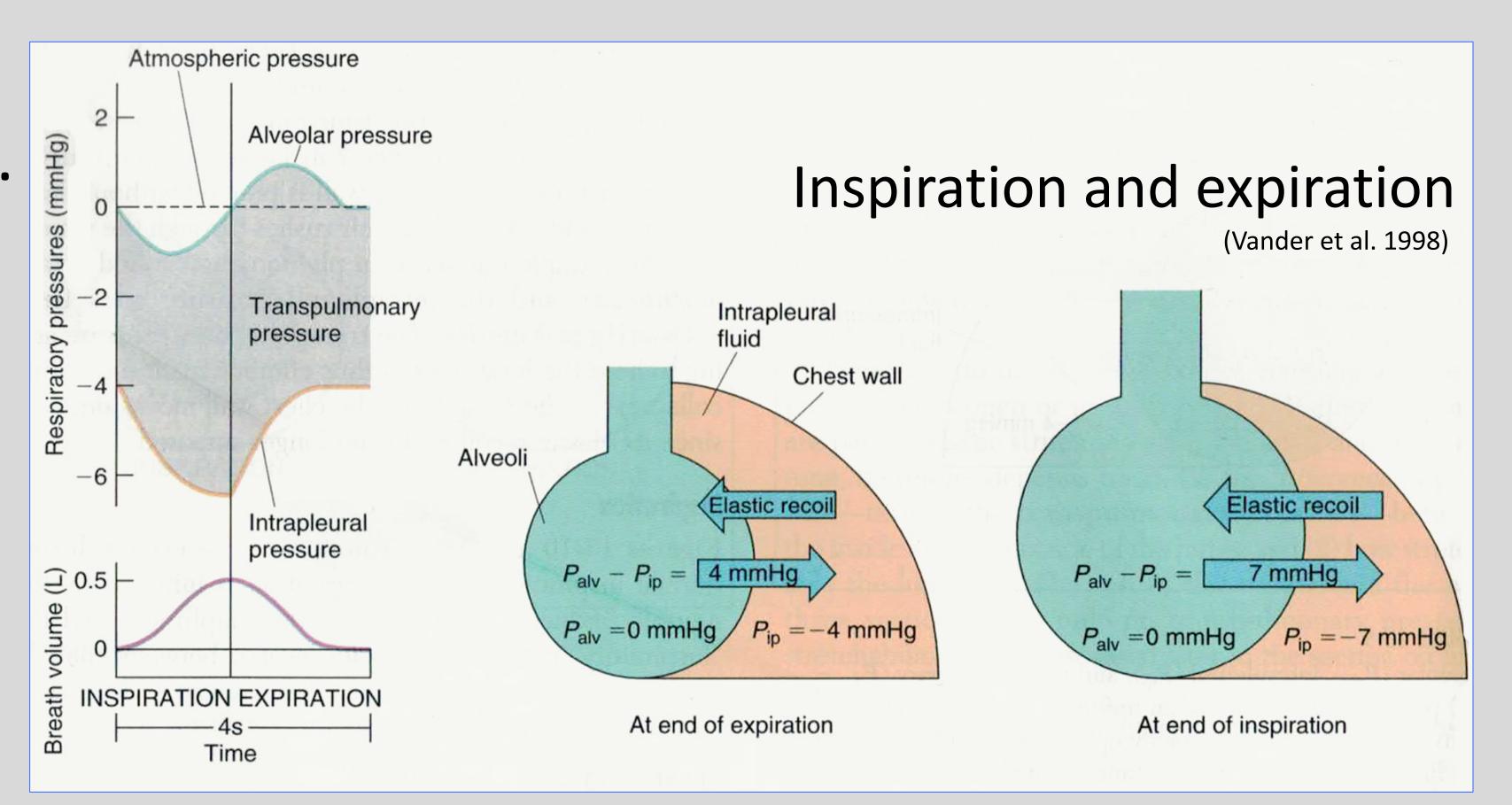
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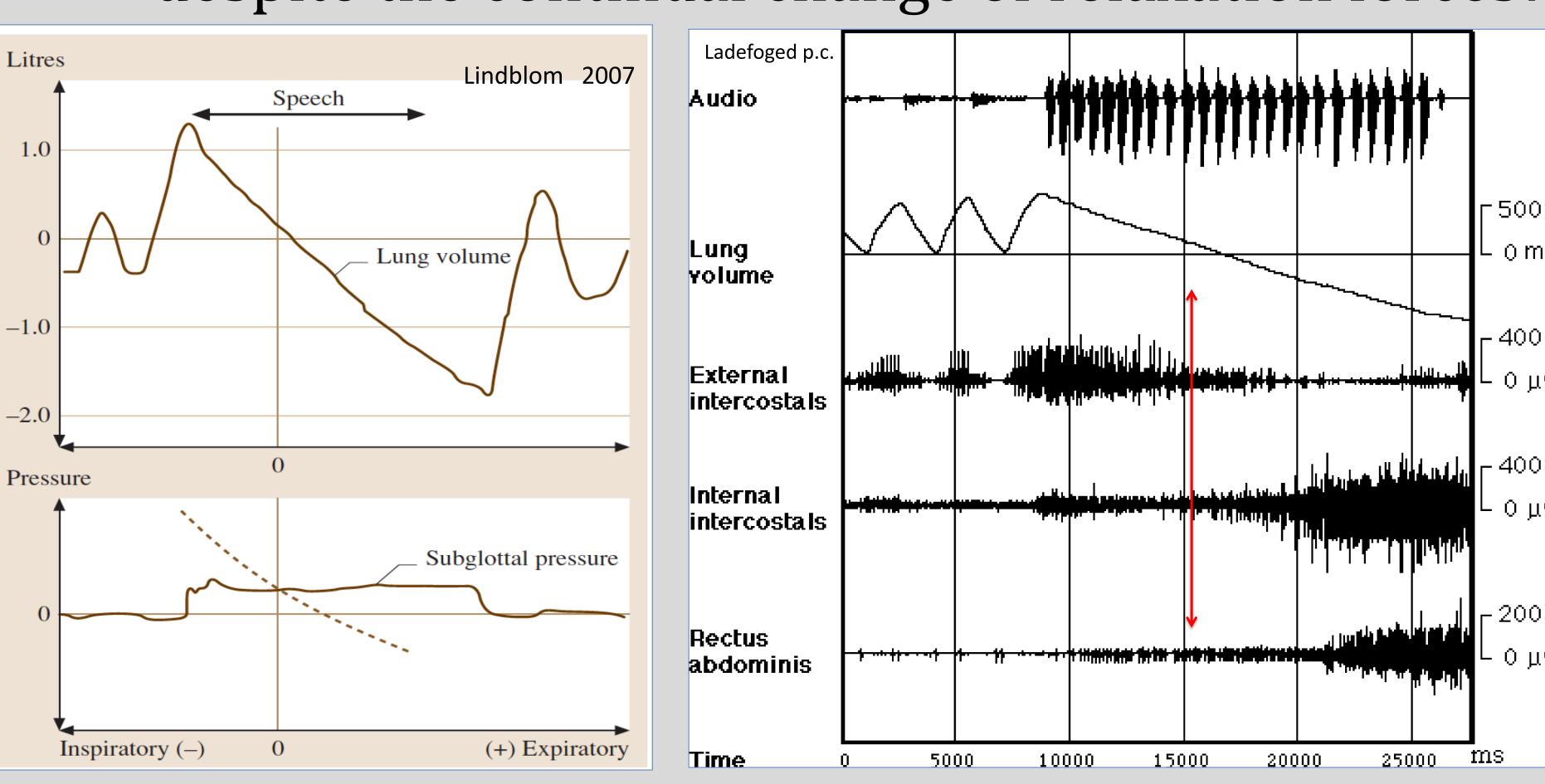
## 1. Background

- Breathing is essential to man's ability to speak.
   The respiratory bellows provide the power to the vocal apparatus. Expiration in speech often continues until lung volume decreases below functional residual capacity.
- Speakers appear to achieve a compromise between ventilatory and speech demands on flow rates. How?

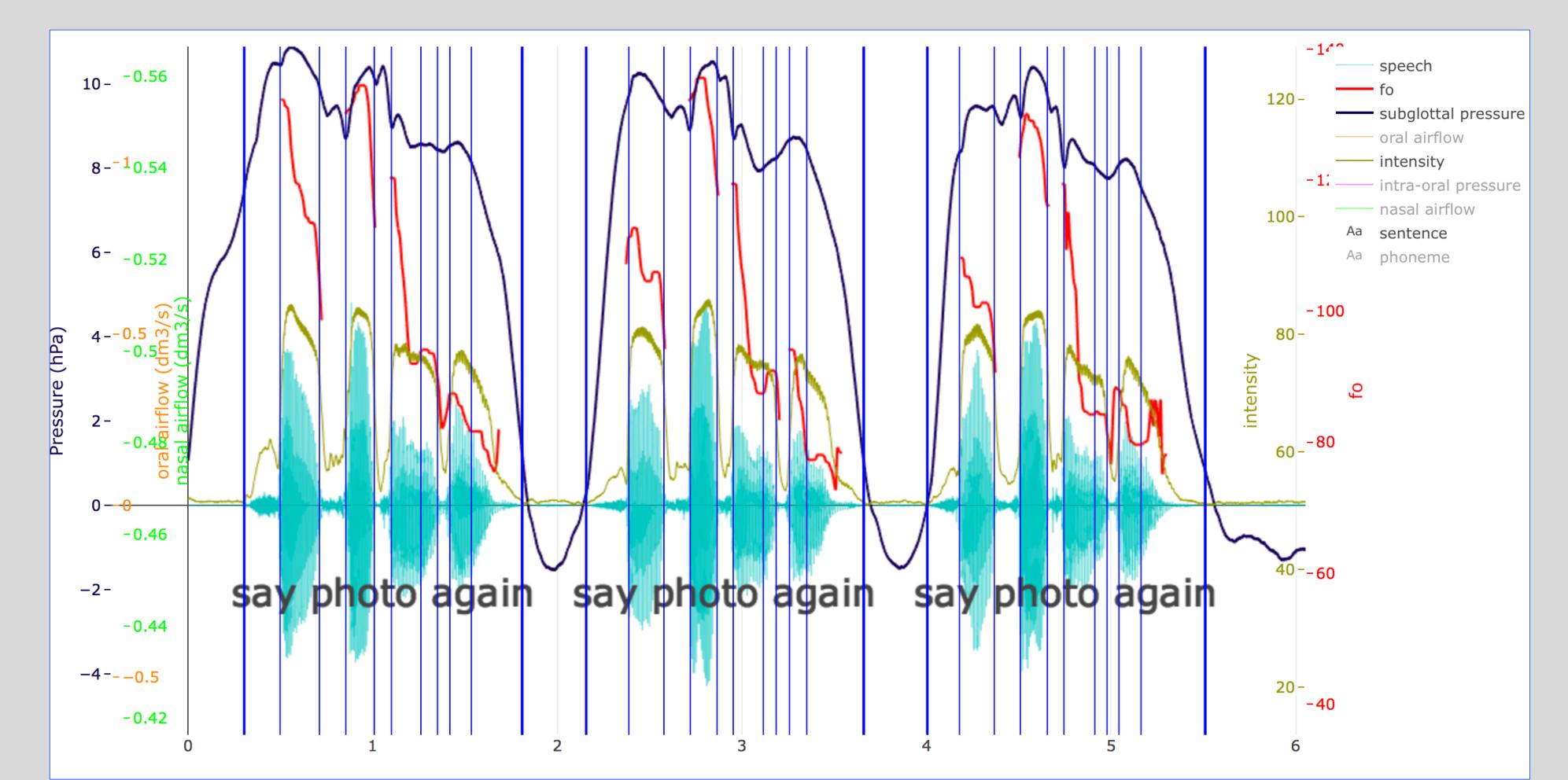




How is the relative constancy of  $P_s$  achieved despite the continual change of relaxation forces?



2. Control During speech an extra 6/10 hPa must be sustained above atmospheric pressure to provide the energy to speak. This is in addition to the ventilatory demands. How is it controlled? By which neuromuscular mechanisms?



What is role of the spinal and cranial nerves?

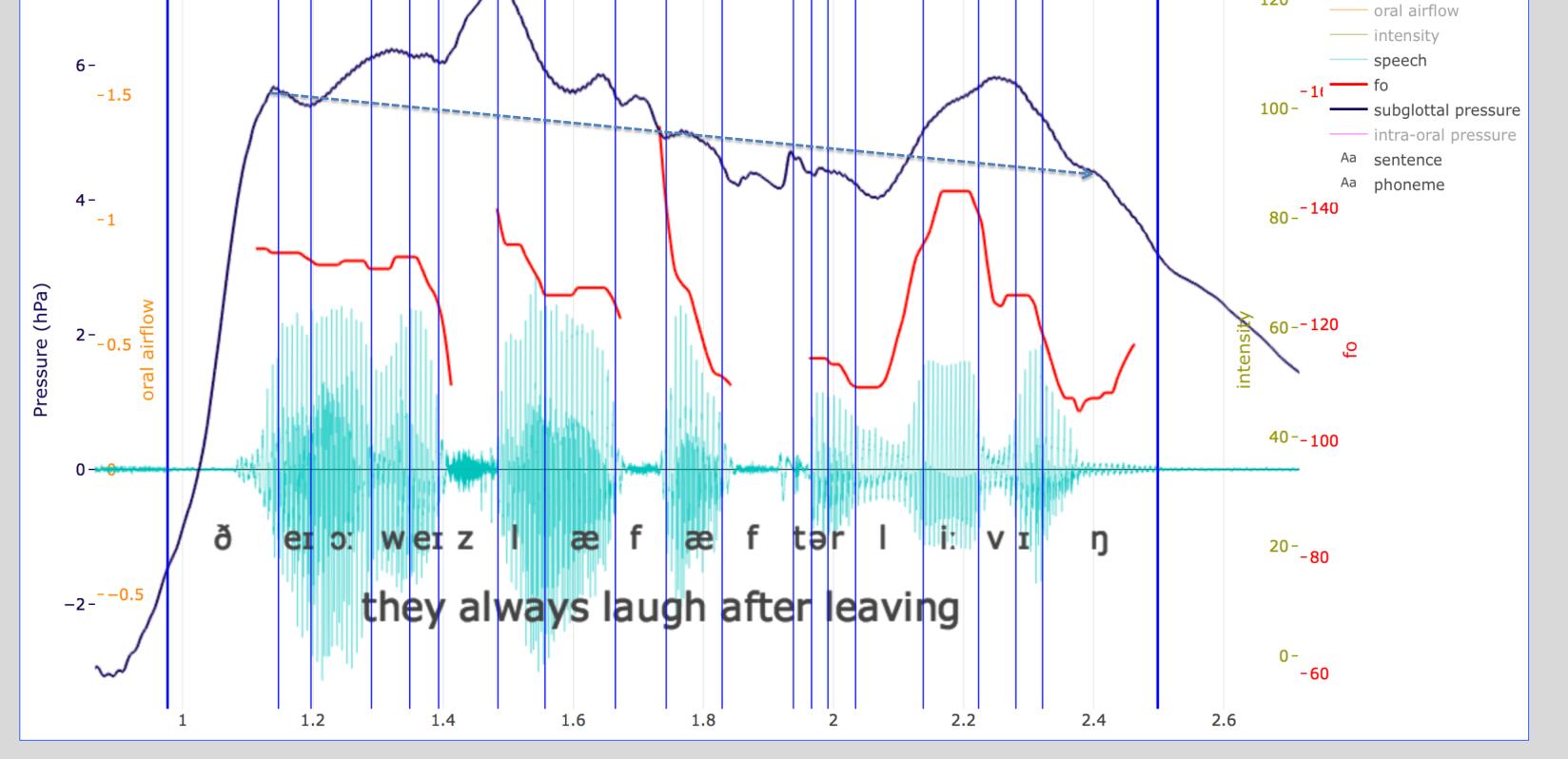
The external and internal intercostals muscles are the most important to regulate  $P_s$ . Not the diaphragm.

 $P_s$  is sustained by the expiratory muscles after the recoil of the lungs tissues.

## 3. Global effects

 $\Delta P_s$  = Loss due to the system's compliance + effects of  $R_g = \frac{A}{II}$  and  $R_o = \frac{A}{II}$ 

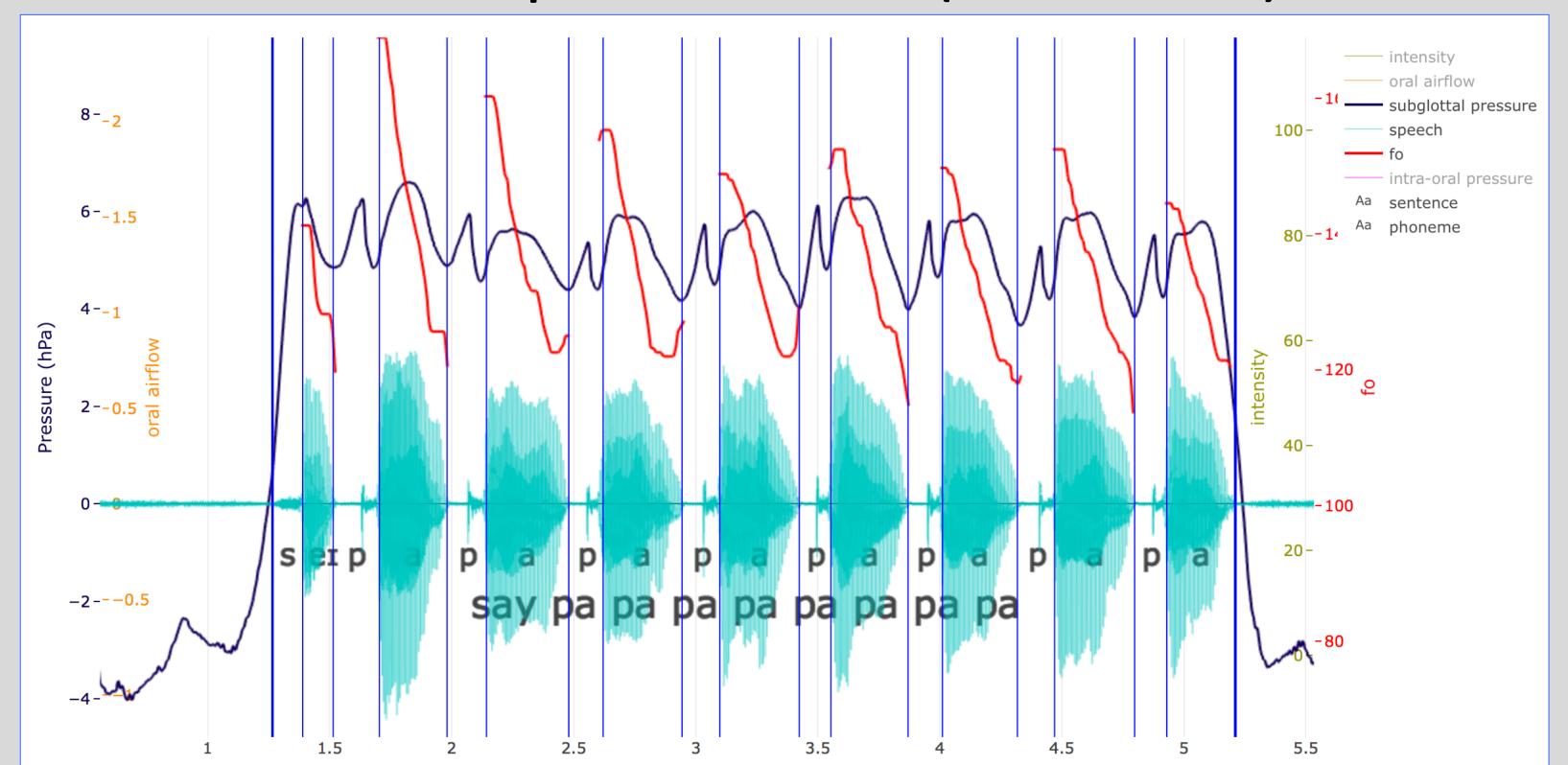
Extra inspiratory air puffs between sentences



## 4. Local effects

Effects of  $R_g=rac{A}{U}$  (vowels) and  $R_o=rac{A}{U}$  (voiceless fricatives)  $R_g+R_o$  (Voiced fricatives)

Lexical and emphatic stress (+1-2 hPa)



 $R_g$  is quickly adjusted and affects  $f_o$  and  $P_s$  that are regulated by  $\neq$  controls.  $P_s$  and  $f_o$  interact in complex ways.