

SPEECH AND LANGUAGE THERAPY IN NOONAN SYNDROME

Many children with Noonan syndrome require Speech and Language Therapy during their early years. Speech and language develop most intensively during the first three years of life. Even as a newborn, babies begin to recognise sounds and voices. Speech gradually develops through vocalisation such as babbling and cooing.

There are several reasons why this development of speech and language may not progress along the 'normal' timetable. Factors that may cause this development to be delayed in a child with Noonan syndrome are hearing impairments, cognitive or developmental delays, weak oral muscles or palate abnormalities.

Many babies with Noonan syndrome have delayed sucking and poor feeding; this in turn can lead to the muscles that are used for speech to be slow to develop. Input from a Speech and Language Therapist at this early stage for advice about oral stimulation and co-ordination of the suck and swallow motions can have an effect on speech development.

You may be concerned about your child's speech if you feel it is not a similar level to other children of that age. There are 'milestones' that are reached at different ages that can demonstrate how your child's speech is developing. An indication of age appropriate speech and language skills is as follows:

Age 1 year

- Babbles
- Recognises own name and simple words (such as cat)
- Nods head for 'yes' and shakes for 'no'

Age 1-2 years

- Uses 10-20 words
- Can use simple 2 word sentences (such as daddy gone)
- Responds to simple instructions (such as get your coat)
- Makes familiar animal sounds and points to body parts

Age 2-3 years

- Has about 450 word vocabulary
- Uses simple sentences for example `me want milk'
- Can follow more complex instructions such as 'put dolly to bed'
- Matches few colours, understands 'big' and 'small'

You should talk to your paediatrician or GP if you are concerned about your child's speech and language development. They can



refer your child to a Speech and Language Therapist for assessment who may recommend activities to stimulate development or group or individual therapy.

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