

Stuttering: A Comparative Analysis of Neurotic and Neurotic Forms

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Abstract – The article deals with the formation of correct speech. The relevance of the neurosis and neurosis-like forms of stuttering, their differentiation and methods to determine and eliminate them in time is justified.

Keywords – *Speech, Speech Disorders, Child, Mental and Physical Health, Differentiation, Method.*

I. INTRODUCTION

Decree of the President of the Republic of Uzbekistan No. PF-5270 of December 1, 2017 and Decree of the President of the Republic of Uzbekistan No. PF-5198 of September 30, 2017 "On measures to radically improve the management of preschool education", Cabinet of Ministers of September 9, 2017 No. PP-3261 The resolution "On measures to radically improve the system of preschool education" is of great importance in our work.

One of the main tasks of a preschool institution is to form their correct oral speech as a result of children mastering the literary language of their people. This general task consists of the following special tasks: to cultivate the sound culture of speech, to enrich, strengthen and activate the vocabulary, to improve the grammatical correctness of speech, to form oral speech, to develop fluent speech, to cultivate interest in artistic speech, to prepare for literacy.

Improper speech development affects the development of a child as a person. Speech defects and defects in the pronunciation of sounds have a negative effect on the increase of his vocabulary, the grammatical structure of speech, and as a result the child expresses his opinion briefly, incomprehensibly. Therefore, it is necessary to teach everyone to master the speech, to fully express their

thoughts. One of the most important factors in human development is speech. So, the correct content of speech depends on the speech of others, speech experience, correct speech environment and education. Because speech is a tool of interpersonal communication, a powerful tool for national wealth and education and creativity. However, for some reason, speech defects are common in children. Therefore, the detection, study, elimination and prevention of speech defects are relevant for all areas of speech therapy (speech therapy, oligophrenopedagogy, typhlopedagogy and deaf pedagogy), because everyone with a developmental defect a child also has a speech impediment. Speech disorders, especially stuttering, do not go away on their own. This requires long-term correctional-speech therapy and educational developmental work.

Many scientists on stuttering differ in their definitions. In determining the neurotic or neurosis-like forms and classification of stuttering in the differential diagnosis is briefly and clearly presented by modern researchers (Kovalev VV, Asatiani NM; Drapkin BZ Belyakova LI, Dyakova EA, etc.). . V.M. Akimenko «Ispravlenie zaikanie u detey i vzroslyx» prakticheskoe rukovodstvo dlya logopedov. Rostov n / D: Phoenix, 2017 s-8.

Studies have shown that stuttering has two types of neurosis and neurosis-like types and is distinguished by different pathogenetic mechanisms.

There are 2 main types of stuttering compared to new sources, which are neurotic and neurosis-like (N.I. Assatiani et al.). In the first type, it is similar in general functional structure, and in the second, it is organic and neurosis-like (neurotic), but it is not.

Shklovskiy V.M. The analog of organic stuttering is caused by organic damage to the brain as a result of stuttering and stuttering-like disorders, and the functional analogue is caused by stuttering as a result of psychiatric disorders (TG Wiesel "Fundamentals of Neuropsychology" Moscow-2019 p.

In addition to these species, Shklovsky VK found that pseudo-stuttering, stuttering (imitation) by imitation, and stuttering in other diseases is a syndrome. Muminova L.R. for the first time in Uzbekistan on "Elimination of stuttering in schools and adults." defended his Ph.D. Such recommendations, data have been given and are still relevant today. We can and should use them in our correctional work.

Stuttering is a disorder of the speed and tone of speech as a result of contraction of the muscles of the peripheral speech apparatus. [L.R.Muminova «Speech therapy» Tashkent 2014 p-49]

Pronunciation, stress, intonation, rhythm are disturbed. Speech is interrupted by unreasonable pauses, repetitions, and the rate of resonance and pronunciation, volume, pitch, and melody change depending on the emotional state of the stutterer.

Stuttering is also characterized by various disorders of general and speech motor skills. They can be in the form of violence (speech shots, strokes, neck, face flies) and voluntary seizures. Smokers use such gestures to mask or alleviate their difficult speech.

Stuttering is multifactorial and can be caused by several similar factors. Many researchers cite factors that cause stuttering as follows:

Parental neuropathic stress: nervousness, infectious and somatic diseases, partial MNS dysfunction and weakness.

Hereditary stresses: stuttering, development as a result of congenital factors, hereditary symptoms in recessive state

Under the influence of many adverse factors, brain injury that develops at different stages:

In the perinatal period: pathology of pregnancy, the main severe toxicosis in the first half, the risk of miscarriage, mental trauma, bleeding, rhesus imbalance, hypoxia, uncontrolled medication, taking vitamins

In the natal period: stimulation, clamp placement, head injury during childbirth, brain disease, birth injuries, fetal misplacement, asphyxia, premature birth, rapid or prolonged "dry" births.

In the postnatal period: infectious, traumatic and trophic metabolic disorders in various pediatric diseases, brain injuries in the first year, hypoxia, uncontrolled drug intake.

Neuropathic features of the smoker: night terrors, enuresis, deep nervousness, emotional tension.

Flattening factor. The cerebral hemispheres are mainly formed by the age of 5 years, before which functional asymmetry in brain activity is formed. Speech function, ontogenetically highly differentiated and late-developing, mostly weak and shy.

Speech function develops later in boys than in girls because the nervous system is more sensitive. As a result of rapid formation, rapid speech development may occur before age 2 or speech development may be delayed until age 3–3.5. In many children during this period, as a physiological condition, it is observed with the repetition (iteration) of syllables or words. [V.M. Rostov n / D: Phoenix, 2017 s-8]

Mental trauma to the child (increased sensitivity due to fear, anxiety) Being sensitive as a result of not treating others well. Lack of good and emotional communication between adult and child.

We, in turn, want to recommend stuttering in children through a simple and convenient table-based approach in identifying neurotic and neurosis-like forms. This defectologist teaches our speech therapists quick and easy differentiation.

Comparative classification of stuttering.

<i>neurotic stuttering</i>	<i>neurosis-like stuttering</i>
<i>The beginning</i>	<i>The beginning</i>
-Having psychogenesis - Acute course - 2-6 years old - against the background of extended phrase speech	- slowly - At the age of 3–4 years - corresponds to the period of formation of expressive speech - without main reasons
<i>Anamnesis</i>	<i>Anamnesis</i>
-No indication of pathology in childbirth and intrauterine development	- History of severe toxicosis in pregnancy, risk of miscarriage, asphyxia during childbirth, etc.
<i>Passage</i>	<i>Passage</i>
<i>On the plus side: the dynamics of speech disorders are recurrent. This recidivist was 7 years old, at the time of going to school.</i> <i>Disadvantages: At the age of 6-7 years, depending on the situation, there is a decrease in speech activity in front of strangers or in any situation</i>	-benefit: when the child does not need timely and sufficiently long-term (at least a year) speech therapy, mainly re-correctional care. Their speech remains somewhat fluent -disadvantage: neurosis-like stuttering tends to progress if speech therapy is not provided
<i>Motorics</i>	<i>Motorics</i>
-The first mental and physical development is mainly normal for their age. Motor skills (sitting, standing, walking) are formed in a timely manner. - Incomplete movement of the elements of the movement, in some cases, increased lethargy,	-the presence of clearly unknown areas of organic damage (cerebroasthenic, hyperdynamic syndromes, etc.), the occurrence of motor injuries of the brain system. - Decreased or partially delayed physical development with age. Poor motor coordination

<i>fatigue</i>	<i>differs from healthy children with motor disorders.</i>
<i>Speech ontogenesis</i>	<i>Speech ontogenesis</i>
<i>Often early speech development</i> <i>shi is observed: the first words are formed at 10 months, the expressive speech at 16-18 months. In a short period of time (2-3 months) the child develops a wide range of phrases, the vocabulary is rapidly increasing, and the use of complex sentences in the grammatical structure of speech.</i> <i>In the neurotic type of stuttering, there are no disturbances in voice pronunciation, or age-related functional dyslalia may be observed.</i> <i>Logophobias in 10-12 year olds</i> <i>-speak fluently in certain situations (in solitary speech, during emotional comfort, in the dispersion of active attention when speaking, etc.)</i>	<i>-usually the first words are observed at the age of 1.5 years, simple phrases at the age of 3 years, detailed phrases at the age of 3.5 years.</i> <i>-speaking speech development is accompanied by pronunciation disorders of many sounds, slow accumulation of vocabulary, grammatical structure of speech is late and incomplete</i> <i>-styortaya dysarthria and dysarthria can be observed</i> <i>- Poor coordination of articulatory movements, limited lip and tongue movements. Often there is a violation of the tone of the tongue muscles, "tremor", inability to feel the tip of the tongue.</i> <i>Speech problems:</i> <i>-light - phonetic side of speech is not fully developed-</i> <i>league</i> <i>-middle - underdeveloped phonetic-phonemic side of speech</i> <i>-complete development of heavy speech.</i>
<i>The main characteristic</i>	<i>The main characteristic</i>
<i>-be very impressive</i> <i>-fear</i> <i>-enuresis</i> <i>-fear of the dark</i> <i>-convenience</i> <i>-nerviness</i>	<i>-not in</i> <i>to be fast</i> <i>-anxiety or passivity</i> <i>instability of attention</i> <i>-excitement</i>

In short. One of the most important factors in human development is speech, so speech development should be considered from an early age. Basically, it explains the conditions under which stuttering occurs and how its types are described by our scientists, and how they differ from each other.

We, in turn, recommend based on the simple and convenient table above in identifying neurotic and neurotic-like forms of stuttering in children. This, in turn, teaches our speech pathologists to differentiate quickly and easily.

We hope that the tips and advice suggested in this article will benefit children with speech impediments in the future. I think it is appropriate to remember once again the wise saying that is common among our people - the children of a powerful nation will be healthy. We believe that looking at our children, our children, who are our support and pride, with confidence and respect, is an expression of confidence in our future, respect for our nation and people.

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