

**Excluded: Procedure not routinely funded**

**Policy Statement 89: Speech and Language Therapy in Parkinson's Disease**

**Date of Issue: October 2012 (South Central Priorities Committee)**

**Ratified and adopted: April 2013**

The South Central Priorities Committee considered the evidence for the clinical and cost effectiveness for speech and language therapy in Parkinson's Disease.

The Priorities Committee **recommends** that NHS funding should be available to provide access to speech and language therapy for patients with Parkinson's Disease experiencing difficulties with speech or swallowing. Therapy for patients with Parkinson's Disease **should be commissioned within local speech and language therapy services**. While there is some evidence from randomised controlled trials that speech and language therapy is effective in improving speech in patients with Parkinson's Disease, there is a lack of evidence to support any particular approach or technique compared to others. There is currently a lack of clarity as to whether 'face to face time' with a therapist or the time patients spend practising the technique(s) is the key determinant of outcomes from therapy. There is also a lack of clarity on best timing for, or duration of, intervention over the course of the illness.

Local speech and language therapy services should decide which techniques, for example Lee Silverman Voice Treatment or other specific techniques, to offer to Parkinson's Disease patients, and how to deliver these, **within their available resources**. If a local service considers additional funding is required to offer a specific technique then this funding should be sought through the established process for consideration of service developments.

In reaching this recommendation, the committee has taken into account the recommendations on access to speech and language therapy included in NICE Clinical Guideline 35 (2006), Parkinson's Disease: Diagnosis and Management in Primary and Secondary Care.

There are between 4,000 and 7,500 people with Parkinson's Disease in the South Central area and around 50% of patients have voice and speech deterioration sufficient to make communication difficult, particularly with strangers. There is evidence from randomised controlled trials to show that speech therapy, using a variety of techniques, can improve loudness and phonation. There is no published evidence of cost effectiveness.

NOTES:

1. Procedure not routinely funded formerly known as Low Priority/Procedure of Limited Clinical Value/Never Dos.
2. Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status.
3. This policy will be reviewed in the light of new evidence or guidance from NICE.
4. Further information on policy statements is available from <http://www.fundingrequests.ccsu.nhs.uk>