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EXPERIMENTAL DEVICE FOR DETECTING LARYNGEAL MOVEMENT DURING SWALLOWING

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Abstract

It has been reported that swallowing is a rhythmic movement, in which the onset of the oro-pharyngeal stage of swallowing starts from the mylohyoid muscle, followed by movement of the oral and pharyngeal muscles, and reaching the superior esophageal sphincter muscle. This is defined as the oro-pharyngeal stage of swallowing. It has also been reported that along with this movement, the larynx elevates in an antero-superior direction. To investigate the swallowing movement, it would be useful to be able to detect the start of swallowing movements from the body surface. Such a device was designed in this study to investigate the relationships between the onset of laryngeal movement and the EGM initiation of the anterior digastric muscle. Although experimental conditions must be further examined, we were able to record the reproducible movement and the position of larynx using our device provides another tool for studying the swallowing movement.

Key words: Swallowing—Pharyngeal swallowing—Anterior digastric muscle—Swallowing reflex
INTRODUCTION

Movement of the oral and pharyngeal organs during swallowing has been studied by X-ray television-movie methods. These reports have shown that swallowing is a rhythmic movement in which the muscular contraction starts from the mylohyoid muscle, followed by contractions of the oral and pharyngeal muscles, and reaches the superior esophageal sphincter muscle, completing the oro-pharyngeal phase. Along with this movement, the larynx elevates in the antero-superior direction. To investigate this pattern, it is necessary to detect the start of a series of swallowing movements from the external body surface. In a previous report, electromyograms (EMG) recorded with surface electrodes was used to detect the initiation of the contraction of the anterior digastric muscle which was defined as the start of swallowing. However, since many muscles are present in the cervical region, the contraction of the anterior digastric muscle have not been accurately measured. We speculated that if laryngeal movement could be used as a marker to search for the start of swallowing, it could provide another standard for investigating the swallowing movement. In this study, we designed a device to detect the onset of laryngeal movement in order to compare the laryngeal movement with the EGM initiation of the anterior digastric muscle.

EXPERIMENTAL METHODS

The subjects were five healthy males volunteers without any disorders in oral function. The subjects were instructed to sit on a chair with their occlusal plane horizontal to the floor. The laryngeal movement detector designed in this study was attached to the cervical area (Fig. 1). This detector consisted of two sets of three pressure sensors with diameters of 6 mm, aligned equidistantly with an inter-center distance of 8 mm, as shown in Fig. 1. The sensor outputs were fed into a dynamic strain amplifier for detection of the pressure applied to the sensor. The first pressure sensor was placed on the skin surface of the thyroid cartilage, so that the sensor output was maximized when the larynx was in the resting position, and it decreased into a lower level when the larynx deviated superiorly. EMG electrodes were attached to the skin in the region corresponding to the anterior digastric muscles. The subject kept 1 ml of water in the oral cavity and swallowed immediately after being instructed to “swallow” by the operator. EMG and movement of the larynx were recorded by a computer for 5 seconds from the time when the instruction was provided. The time lag between the onset of the laryngeal movement was determined as the time when the voltage output from the first pressure sensor started to decrease. This time and the initiation of the electromyogram of digastric muscles were both measured.

Recording condition of EMG

Muscle activity was recorded for 5 seconds with 1 kHz of sampling rate. Therefore, the sample values included 5,000 points (1,000 Hz × 5 s). Each RMS value was defined as the square
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The base line was determined as mean root mean square (RMS) value during the first one second \((1,000 \text{ Hz} \times 1 \text{ s})\). The time point at which the RMS value preceded the base line by two times was registered as the onset time of the EMG. Surface electromyograms (EMGs) were recorded with a pair of electrodes from the anterior digastric muscle. EMG data were band-pass filtered with 30–1,000 Hz.

**Laryngeal movement detector**

A bridge circuit was inserted in the pressure sensor (Kyowa Electric Company). Resistance of a bridge circuit was changed by pressing the surface of the sensor. The change in resistance was proportional to the pressure and could be recorded as a difference of voltage.

**Dynamic strain amplifier**

A direct current amplifier was used and the degree of amplification could be set to eight levels; 1, 10, 20, 50, 100, 200, 500 and 1,000 times. In this study, it was set at 1,000 times.

**Computer: PC9821 Xa10**

**Program: Borland C++**

The sensitivity of the pressure sensor was 0.317 mV/V. The frequency of the AD converter was changeable from 0.002 Hz to 10,000 Hz. In this study, the sampling rate of the AD converter was set at 1,000 Hz.

**RESULTS AND DISCUSSION**

An example of the voltage waveform obtained by the laryngeal movement detector is shown in Fig. 2. The EMG of the anterior digastric muscles was initiated. (The time lag = A–B)

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![Waveform Graph]

**Fig. 2** The onset of the laryngeal movement was defined as the time when the output voltage of the first sensor started to decrease and the electromyogram of the anterior digastric muscles was initiated. (The time lag = A–B)
The time lag between the onset of the laryngeal movement was defined as the time between the point when the output voltage of the first pressure sensor started to decrease and the initiation of the electromyogram of the suprahypoid muscles. The time lags are averaged from each subject’s five measurements.

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The time lag between the onset of the laryngeal movement was defined as the time between the point when the output voltage of the first pressure sensor started to decrease and the initiation of the electromyogram of the suprahypoid muscles. The time lags are averaged from each subject’s five measurements.

**REFERENCES**


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