An update on the mechanics of human voice production and control

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June 2, 2022 51st Voice Foundation Symposium Philadelphia, PA

Acknowledgment: Research supported by NIH/NIDCD



Toward a cause-effect understanding of voice production

- If a change to the voice production system occurs, how does it affect the produced voice?
- When voice changes, what physiological alteration caused this change?

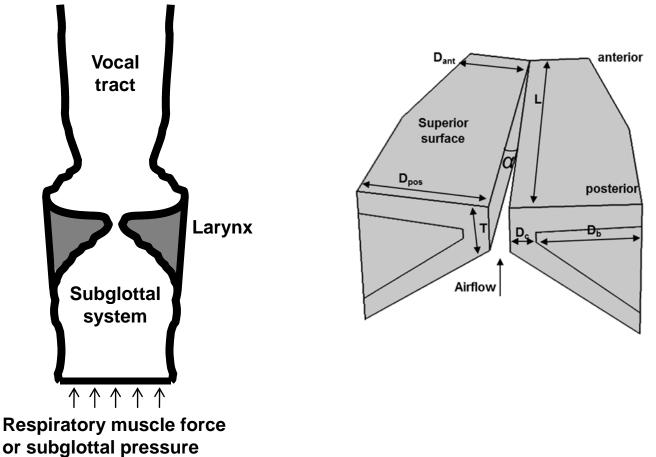


Challenges in establishing causal understanding in human and animal models

- Difficult to reliably control and measure vocal fold geometry and stiffness.
- Geometry and stiffness often co-vary
 - Unable to isolate effects of individual controls.
- Correlation, not causation



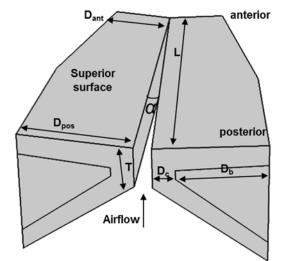
Computational modeling allows changing one parameter at a time, thus causal investigation





Simulations with parametric variations in the following:

- Vocal fold geometry
 - Length (front-back)
 - Width (left-right)
 - Thickness (up-down)
- Vocal fold approximation (glottal gap)
 - Glottal angle α
- Vocal fold stiffness (body and cover layers)
 - Longitudinal stiffness (front-back)
 - transverse stiffness in the coronal plane
- Subglottal pressure
- Vocal tract shape





A total of ~300,000 conditions so far

How changes in controls affect the following

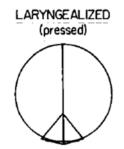
- Vocal fold vibration (Zhang, 2016, 2017, 2021, JASA)
 - glottal area amplitude, minimal glottal area, closed quotient
- Aerodynamics (Zhang, 2016, 2017, 2021, JASA)
 - Mean flow, peak-to-peak flow, MFDR, NAQ
- Acoustics (Zhang, 2016, 2017, 2021, JASA)
 - F0, intensity, and spectral shape
- Voice types (Zhang, 2018, JASA)
 - types 1-3; modal, subharmonics, chaotic, creak)
- Contact pressure during collision (Zhang, 2019, 2020, 2021, JASA)



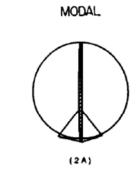
- Regulation of the glottal closure pattern
 - closed quotient, closing quotient
 - spectral shape
- The role of vocal fold medial surface shape in the vertical dimension



Current research and clinical intervention often focus on glottal closure in a 2D plane viewed from above



(1A)



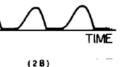
Ua

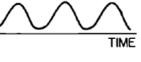
BREATHY (murmur)

(3A)

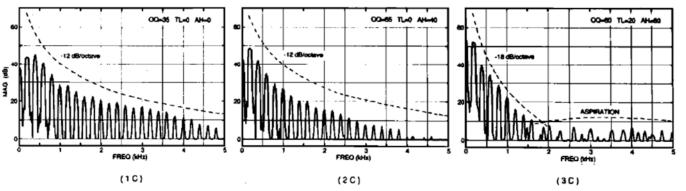


(18)





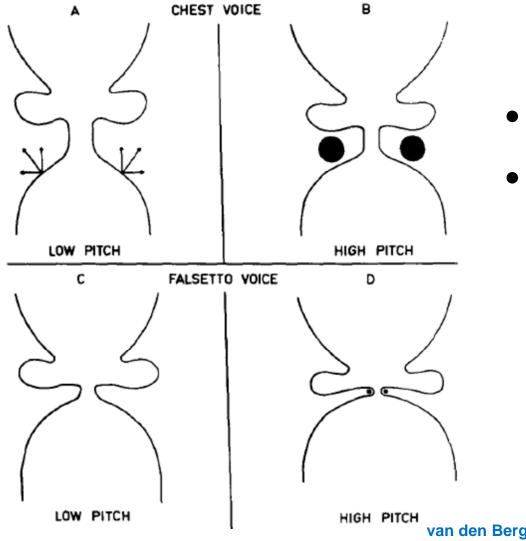
(3B)





Klatt & Klatt, 1990, JASA, 87, 820-856.

Effects of medial surface vertical thickness (van den Berg, 1968)

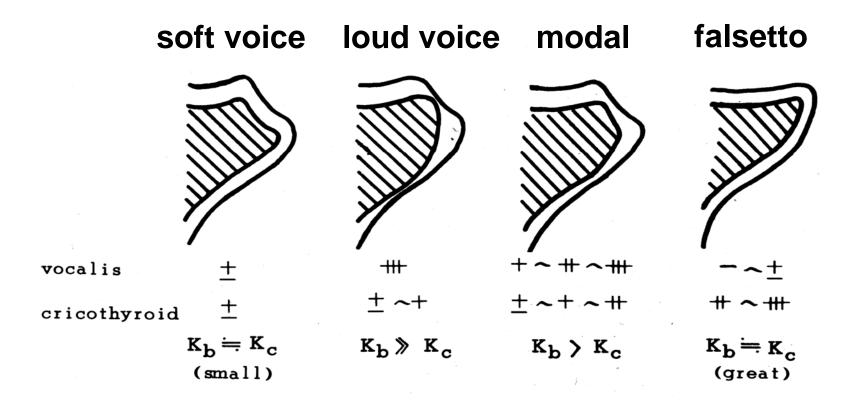


- Thick folds : Chest
- Thin folds: Falsetto



van den Berg, 1968, Ann. N.Y. Acad. Sci., 155, 129-134.

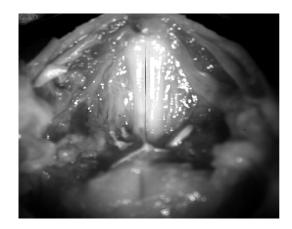
Four laryngeal adjustments of Hirano (1974)

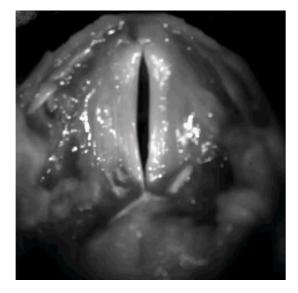


Is the difference in stiffness or thickness?



Hirano, 1974, Folia Phoniatr. 26, 89-94.





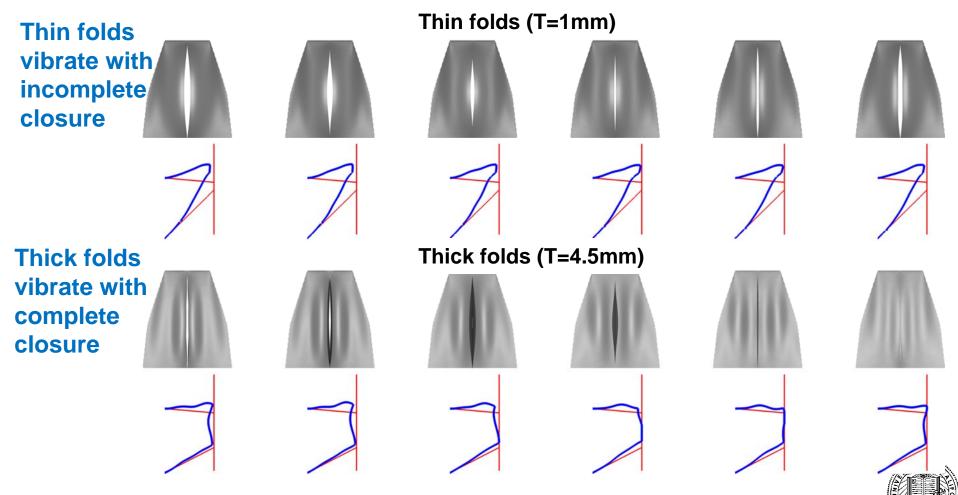
At rest

With airflow

Vocal fold approximation is a necessary condition, but insufficient to guarantee complete glottal closure during phonation.

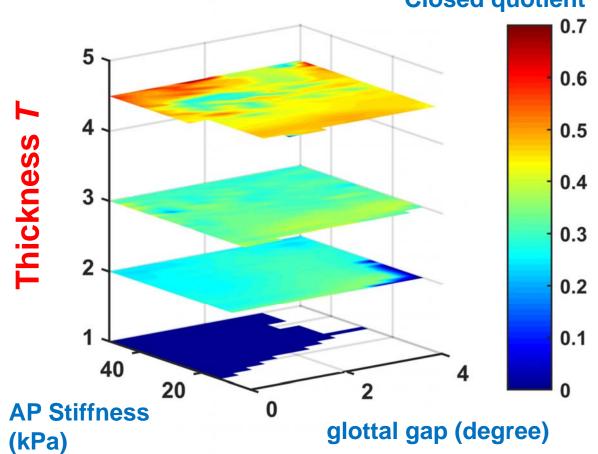


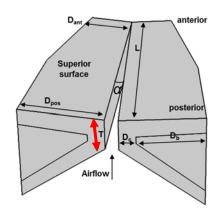
Vocal folds have to be sufficiently thick to achieve glottal closure during phonation



Zhang, 2016, JASA, 139, 1493-1507.

Medial surface thickness determines the duration of glottal closure during phonation

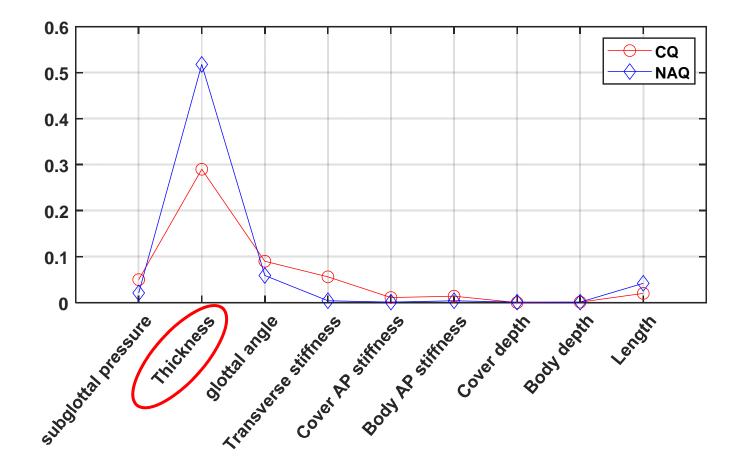




Closed quotient



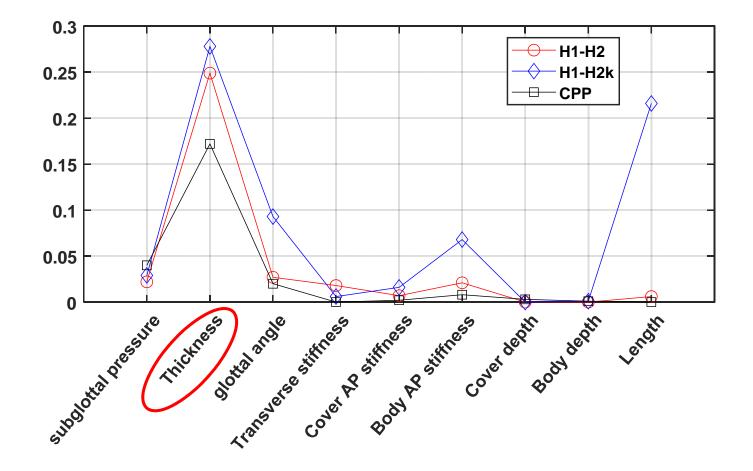
Effect sizes of physiological controls on glottal closure





Zhang, 2021, JASA, 150(6), 4511-4521.

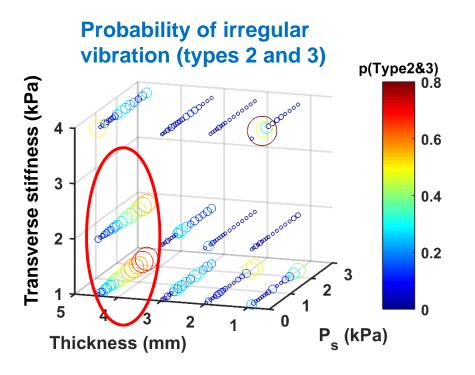
Effect sizes of physiological controls on spectral shape



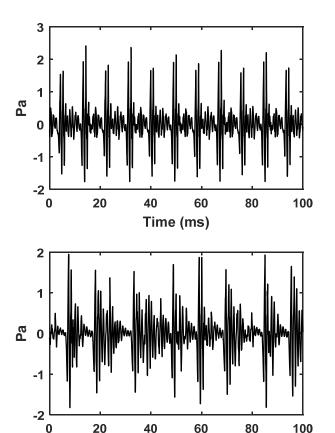


Zhang, 2021, JASA, 150(6), 4511-4521.

When too thick and too soft, vocal folds are more likely to exhibit irregular vibration (subharmonic or chaotic)



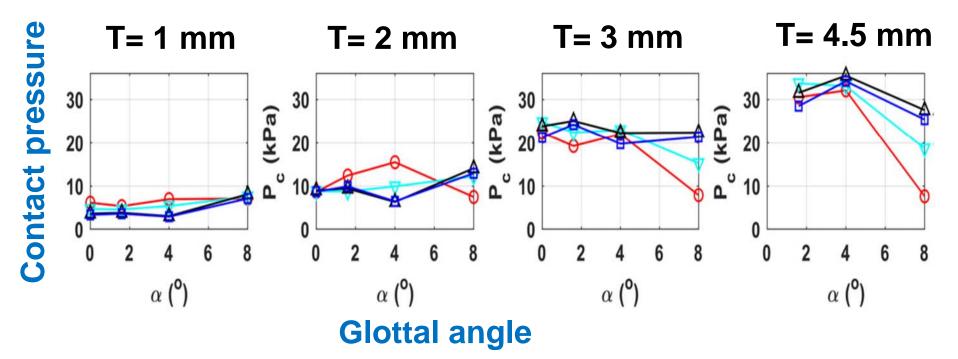
Zhang, 2018, JASA, 144, 1216-1230.



Time (ms)

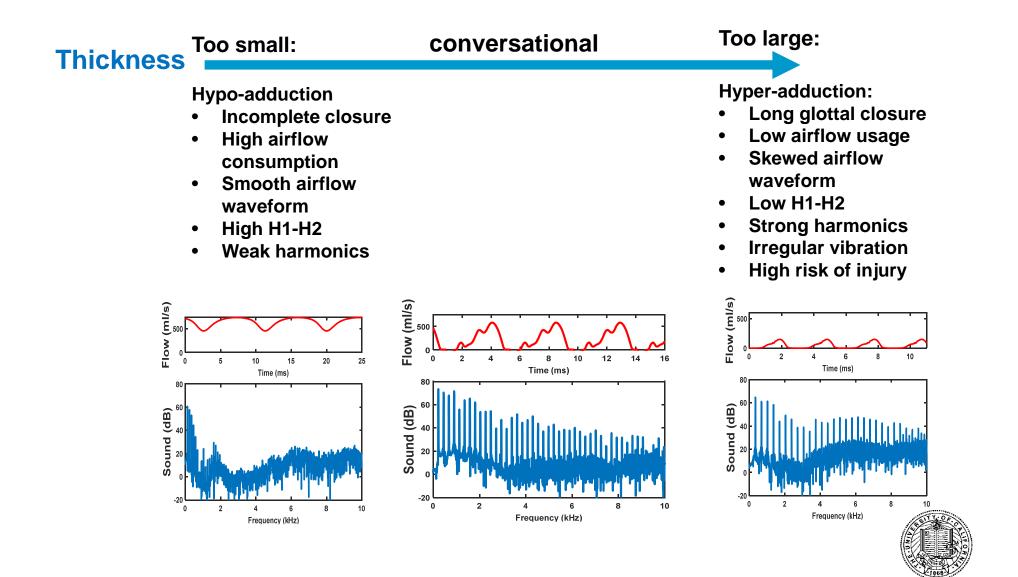


Thicker vocal folds experience higher vocal fold contact pressure and higher risk of injury

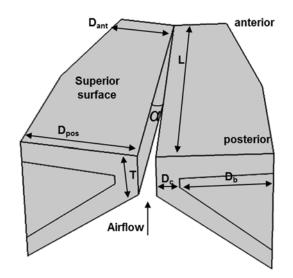


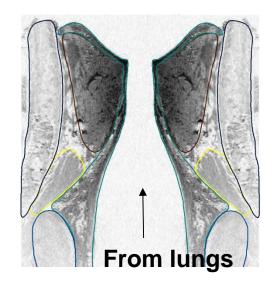


Vertical dimension matters



Does the same observation apply to vocal folds with realistic geometry?





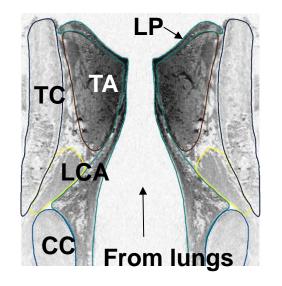


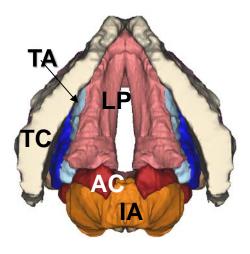
MRI of the 3D human larynx

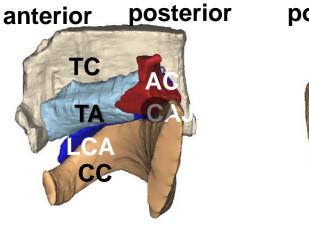
Axial
PlaneCoronal
PlaneSagittal
PlaneImage: Coronal
PlaneImage: Coronal
Plane

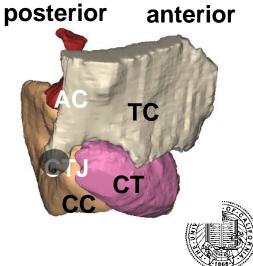
1 – Thyroid Cartilage; 2 – Arytenoid Cartilage; 3 – Crycoid Cartilage; 4 – Thyroarytenoid (TA) muscle;

- 5 Cover layer (lamina propria & epithelium);
- 6 Lateral cricoarytenoid (LCA) muscle;
- 7 Cricothyroid (CT) muscle;
- 8 Posterior cricoarytenoid (PCA) muscle;
- 9 Interarytenoid (IA) muscle.

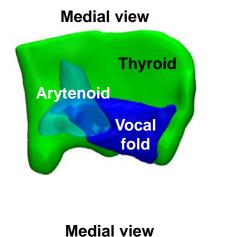


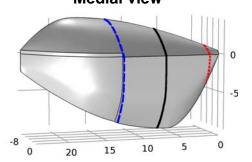


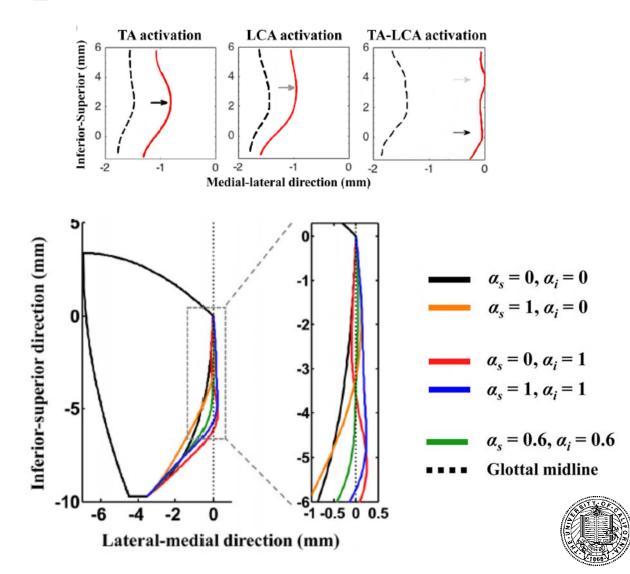




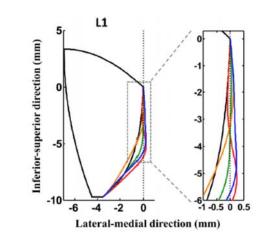
Effect of medial surface shape on phonation

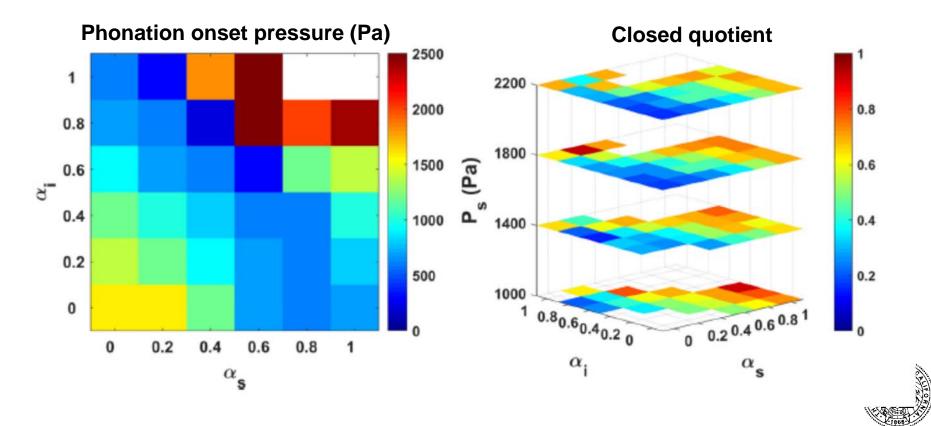






Effect of medial surface shape on phonation



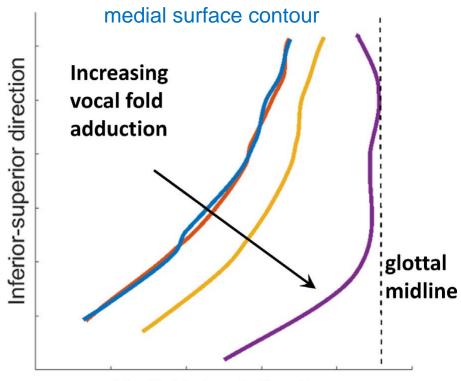


Implications for voice research

• In addition to the superior view, voice research should pay more attention on shape changes in the vertical dimension.



Vocal fold adduction=approximation + thickening

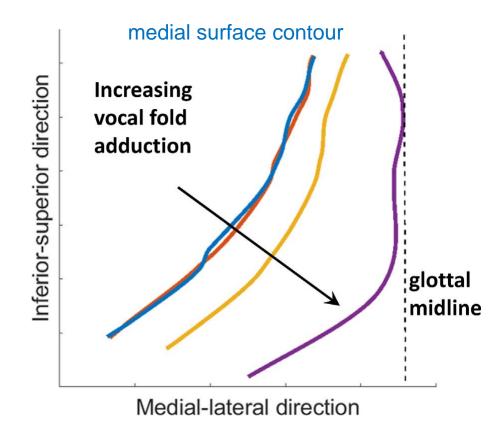


Medial-lateral direction

- Vocal fold adduction not only medializes the vocal folds, but also changes medial surface shape
- Hypo- and hyper-adduction should be differentiated by both the glottal gap and thickness
 - hypo-adduction: too thin
 - hyper-adduction: too thick



Implication for medialization surgery



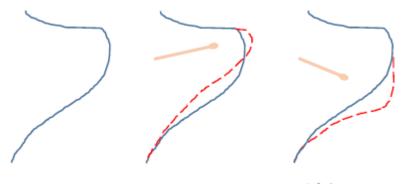
 Needs to both medialize vocal folds and restore optimal medial surface shape





Experimental validation in excised human larynx



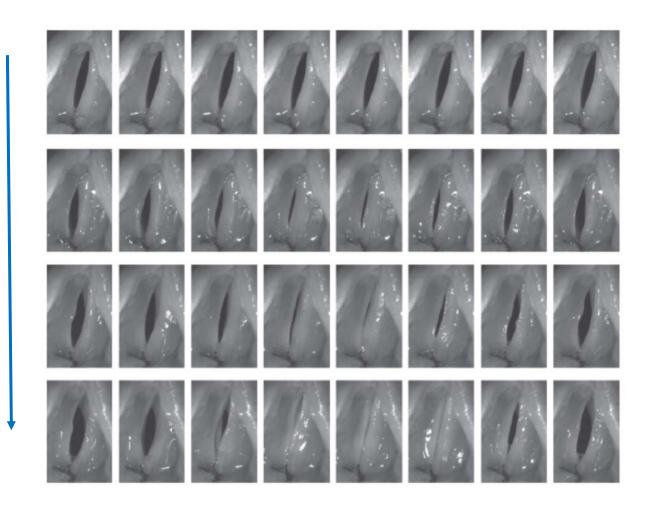


Baseline

Superior medialization Inferior medialization



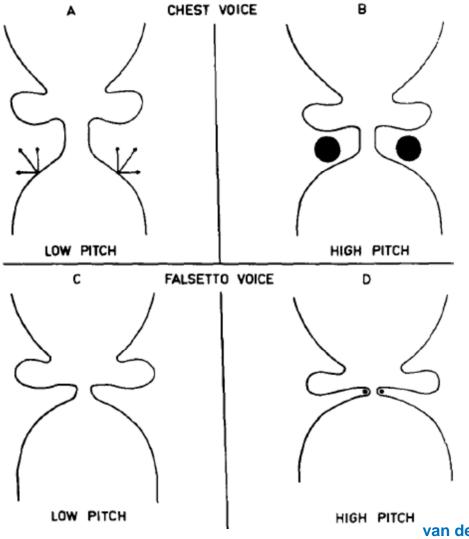
Increasing thickness



Even if the vocal folds appear to be sufficiently medialized when viewed from above, the glottal closure pattern can vary significantly, depending on medial surface shape.



Registers: a thickness effect

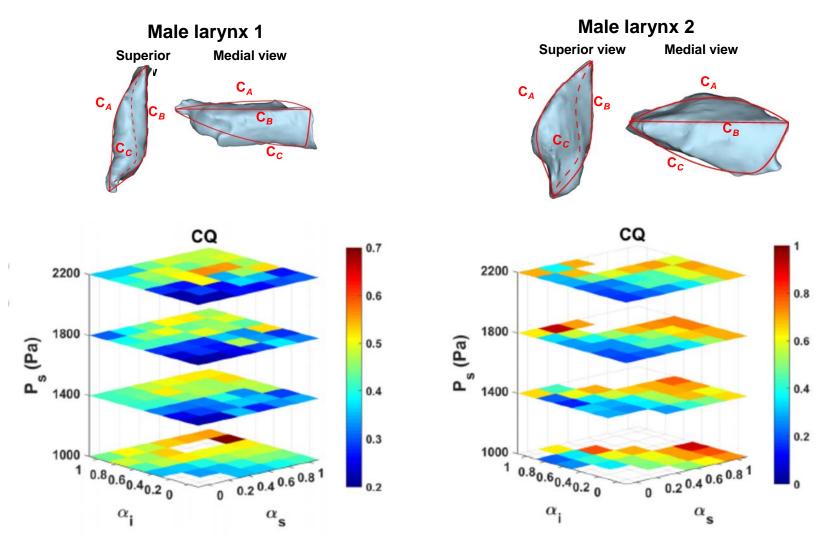


- Thickness plays an important role.
- Because thickness covaries with stiffness, registers will co-vary with pitch:
 - low registers: thick, short, and soft folds at low pitches
 - High registers: thin, long, and stiff folds at high pitches



van den Berg, 1968, Ann. N.Y. Acad. Sci., 155, 129-134.

Each larynx is different!



The resting medial surface shape at least partially determines individual speakers' vocal range or capabilities.



Male-female differences

- Length difference explains male-female differences in F0, vocal efficiency, airflow consumption.
 - F0, flow rate, vibration amplitude, SPL
- Thickness difference explains male-female differences in closure pattern (CQ, NAQ) and spectral shape measures.
 - moderate contribution to F0.
- Reducing vocal fold thickness in a male larynx produces a more female-sounding voice.
 - Transgender voice care may benefit from consideration of thickness manipulation.



Thank you!

