

PHONATION CHARACTERISTICS OF SELF-OSCILLATING VOCAL FOLDS REPLICA WITH AND WITHOUT THE MODEL OF THE HUMAN VOCAL TRACT

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Abstract: *The experimental study presents in vitro measurements of phonation characteristics performed on the developed 1:1 scaled replica of human vocal folds. The aerodynamic, vibration and acoustic characteristics measured with and without the model of the human vocal tract for vowel [u:] are compared.*

Keywords: Fluid-Structure-Acoustic Interaction, Biomechanics of Voice, Modelling of Phonation.

1. Introduction

Voice production is a complex physical process, which involves airflow coming from the lungs, self-oscillating vocal folds and acoustics of the resonance cavities of the human vocal tract. The vocal folds, excited by the airflow, generate a primary sound which propagates in the airways of the vocal tract modifying its spectrum and producing the final acoustic signal radiated from the mouth (Titze, 1994). Understanding basic principles of voice production is important for detection of laryngeal pathologies and treatment of laryngeal disorders. The physical models of voice production are important tools for experimental verification of developed theoretical models of phonation and in the development of the vocal folds prosthesis (Verkerke & Thomson, 2014).

2. Methods

The design of the geometry (size and shape) of the vocal folds replica was based on computer tomography (CT) measurement of the subject during phonation. The replica is made of ca 1 mm thin silicon cover filled by water (Horáček et al. 2015). The fundamental frequency of the self-oscillations can be controlled by changing the hydrostatic pressure inside the vocal folds and by their slight static pretension in the anterior - posterior direction. A simplified plexiglas model of the human vocal tract was developed from the 3D finite element (FE) model designed from the CT images of the subject taken during phonation (Vampola et al. 2015). To ensure the correspondence with reality the straight model of the vocal tract of the circular shape has the same areas in the 47 cross-sections along the vocal tract as the 3D FE model. The model begins with a simple model of the laryngeal cavity near the ventricular folds and ends at the lips by modelling the oral cavity.

The vocal folds were excited by the manually controlled airflow rate with synchronous measurement of the subglottic and oral air pressures (the fluctuating compound and the mean values) and the radiated sound. A general scheme of the measurement set up is shown in Fig. 1. The airflow is coming from the compressor through the float and orifice flowmeters to the model of subglottal spaces created by a simplified model of the human lungs and trachea (diameter 18 mm), then enters the glottal region with the vocal folds and finally the vocal tract model for the vowel [u:]. The airflow rate was increased step by step from the phonation onset up to the airflow rate and the subglottic pressure, which are in the range of physiologically relevant values for a normal human voice production.

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lower flow rates Q and up to 100% for the higher values of Q . The difference in the sound pressure level SPL of the acoustic signal are smaller.

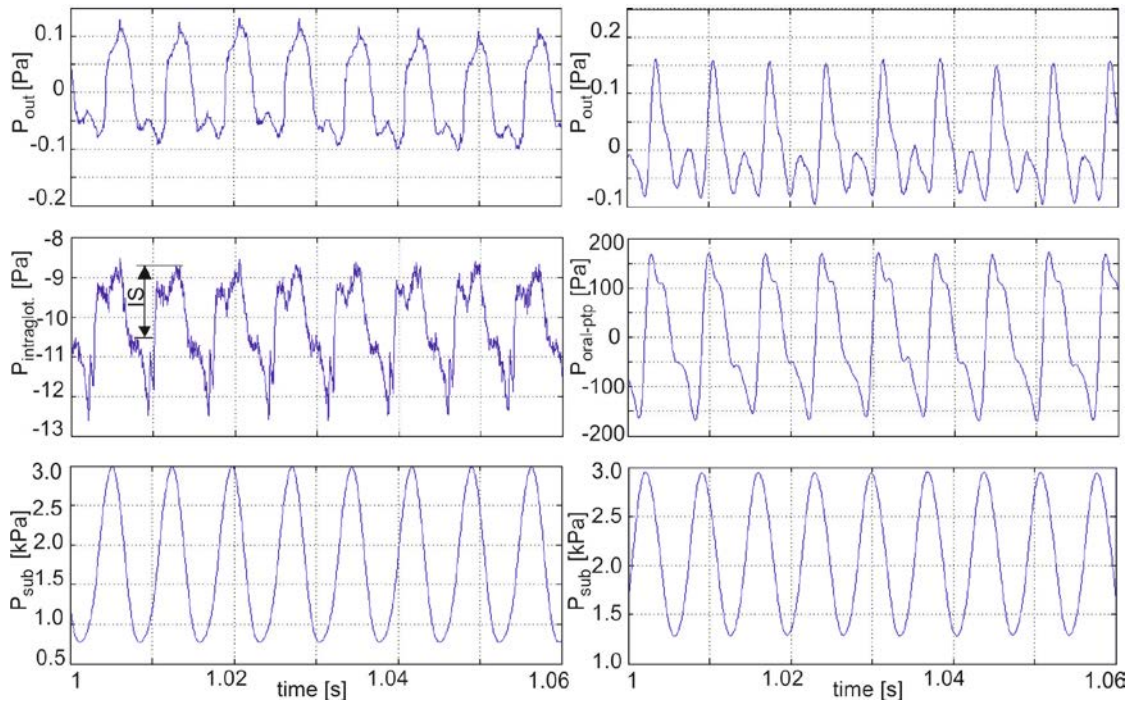


Fig. 2: Measured time signals for the airflow rate $Q=0.25$ l/s: a) without the vocal tract (left column), and b) with the vocal tract model for the vowel [u:] (right column). P_{out} - the generated acoustic signal measured by external microphone, $P_{intraglot}$ - the intraglottal pressure measured by the miniature pressure transducer in the glottis, $P_{oral-pp}$ - fluctuations of the oral pressure and P_{sub} - the subglottal pressure.

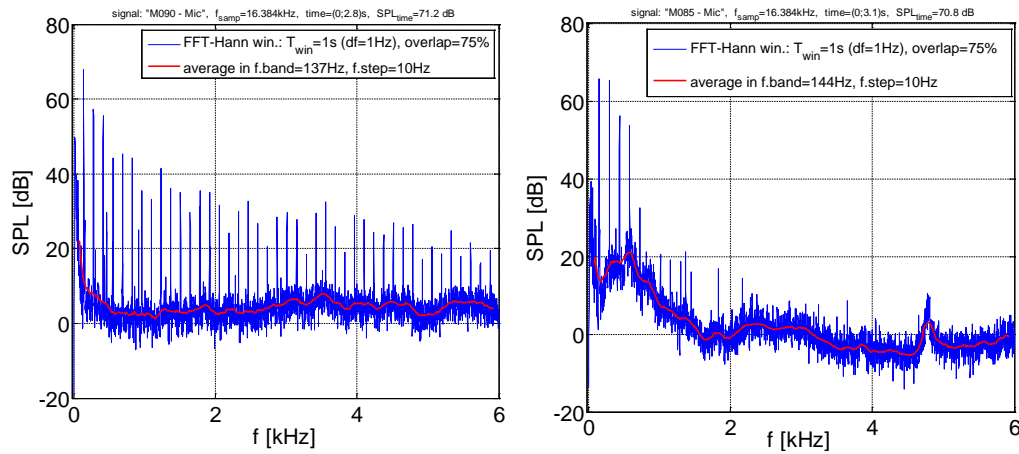


Fig. 3: Spectra of the generated sound measured by the external microphone for the airflow rate $Q=0.25$ l/s: a) without the vocal tract (left), and b) with the vocal tract model for the vowel [u:] (right).

4. Conclusions

The study was focused on modelling the effects of interaction of the supraglottal acoustic cavities with the self-oscillating vocal folds. The vocal fold model created by the silicon cover filled by water phonated in the intervals of the airflow rates $Q=0.2-0.4$ l/s and subglottic pressure $P_{sub} \cong 1.5-2.75$ kPa that are realistic values in humans. The fundamental frequency F_0 which corresponded to a tenor voice increased when the vocal tract was joint system with the vocal folds. The highest impact (contact) stress during the vocal folds collisions was found ca $IS \cong 3.5$ kPa, which is also in the range of values measured in humans (Jiang & Titze, 1994). Important finding is that the vocal tract decreased the IS and peak-to-peak amplitudes of the subglottal pressure. A high contact stress is one of the most detrimental factor causing

nodules and other pathologies in the vocal fold tissue. The influence of the vocal tract on the sound pressure level of the acoustic signal was found small. The measured aerodynamic, vibration and acoustic characteristics are in good agreement with the values found in humans.

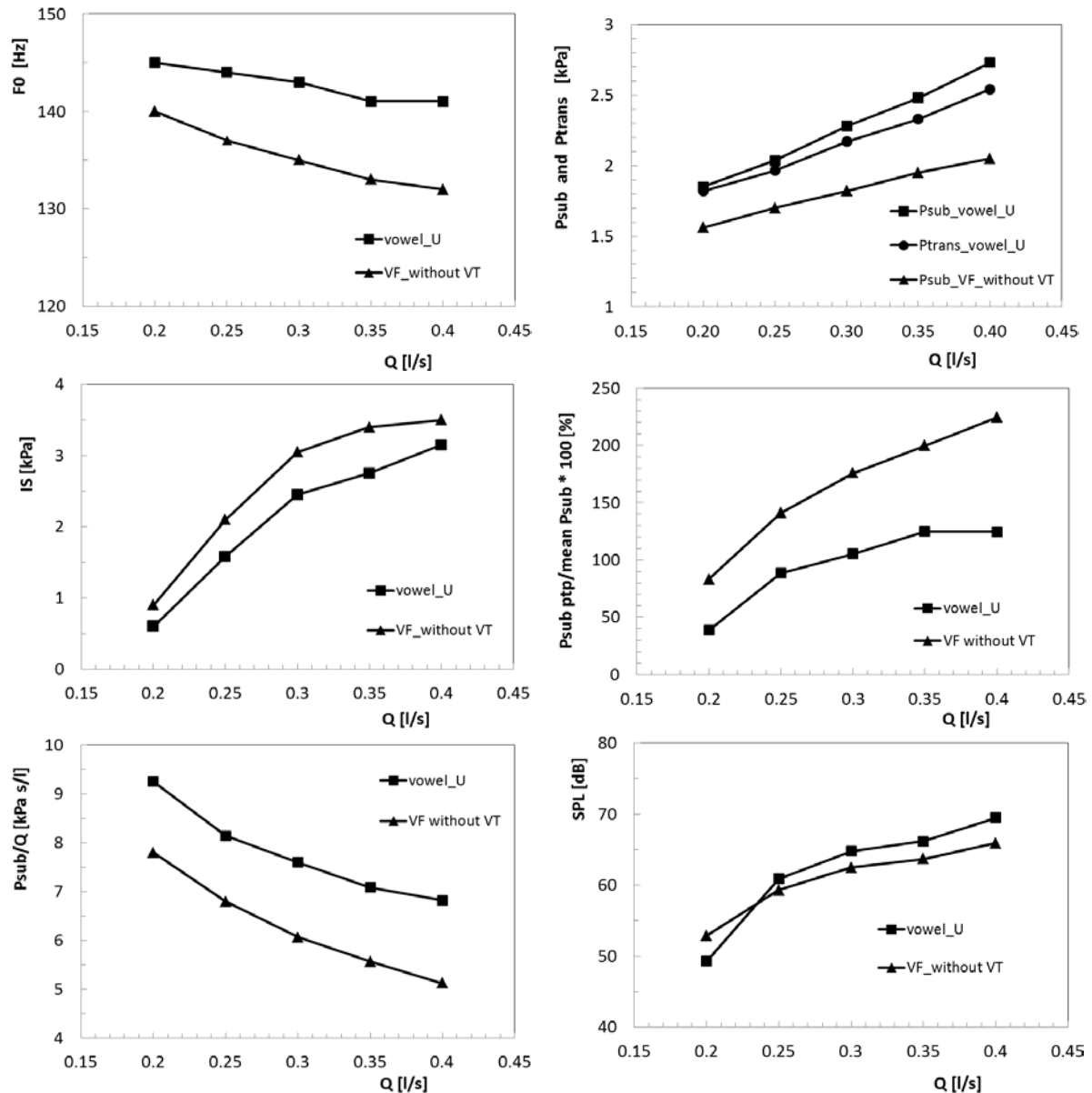


Fig. 4: Comparison of the vibration, acoustic and airflow characteristics of phonation measured on the vocal folds replica without and with the vocal tract model for the vowel [u:].

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