

# 发展性阅读障碍儿童潜在的早期识别标志 ——节奏异常及其特点<sup>\*</sup>

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**摘要** 发展性阅读障碍(Developmental dyslexia, DD)儿童的早期识别及干预对个人和社会发展都至关重要。语音意识缺陷是 DD 的核心缺陷, 本质上由更基础的听觉加工缺陷所引起。节奏作为听觉加工的主要影响因素之一发生于个体生命早期, 是儿童语言习得的关键指标之一。梳理已有研究发现, DD 儿童表现出节奏异常的行为和神经特点, 这些特点导致个体解码效率更低, 阅读理解更吃力, 书写质量也更差。DD 儿童节奏能力异常可以预测其阅读加工层面的缺陷。因此, 可考虑将节奏异常特点作为 DD 儿童正式入学前的潜在识别标志。未来研究可将节奏异常作为切入点, 深入探究 DD 儿童节奏异常的个体差异以及汉语 DD 儿童节奏异常的特点和作用机制, 为开发更具生态效度的节奏测量工具和提高 DD 的早期识别及干预效率提供实证及理论依据。

**关键词** 发展性阅读障碍, 早期识别标志, 节奏异常

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## 1 引言

阅读是个人学业的基础, 也是学校教育的重要内容之一。阅读水平的高低不仅影响个人发展, 也对社会文化水平的提高产生重要影响。但有些儿童在正式进入学校教育前就已出现阅读相关缺陷(Catts & Hogan, 2020), 如发展性阅读障碍。发展性阅读障碍(Developmental dyslexia, DD)是一种神经发育障碍, 是目前研究最深入的学习障碍之一。DD 儿童尽管智力正常, 也充分接受教育, 并得到康复帮助, 但仍然难以准确和/或流利地识别单词, 表现出拼写(汉语 DD 中表现为听写)和阅读障碍(Snowling, 2013; 王久菊 等, 2023)。统计数据显示, 全世界被诊断为某种类型学习障碍的 5 到 17 岁学龄人口中, 80% 患有 DD (Kuerten et al., 2020)。最近一项有关全球小学生患病率的元分析结果显示, DD 总患病率为 7.10%, 男童患病率明显高于女童(男童: 9.22%, 女童: 4.66%) (Yang

et al., 2022)。然而, 通常情况下 DD 儿童在正式进入读写学习阶段后(通常在二年级后)才能被诊断, 此时已错过最佳干预时机, 即出现“阅读障碍悖论”(“Dyslexia Paradox”) (Ozernov - Palchik & Gaab, 2016)。

已有研究表明, 语音意识缺陷是 DD 的核心缺陷(Bryant & Goswami, 1986), 这种缺陷本质上是由更基础的听觉加工缺陷引起的, 个体对节奏线索的敏感性是听觉加工最主要的影响因素之一(Lallier et al., 2018; Mascheretti et al., 2017)。节奏(Rhythm)普遍存在于不同文化中, 是音乐和语言的基本元素(Fiveash, Bedoin et al., 2021), 也是一种以突出模式和分组为基础的独特心理现象, 具有突出性和规律性(Arvaniti, 2009; Dauer, 1983; Nolan & Jeon, 2014)。突出性(Prominence)又称对比性(Contrast), 常通过前后刺激的对比显现, 帮助听者感知节奏重音, 如言语的重轻音交替及音乐的音高起伏(Arvaniti, 2009); 规律性(Regularity)又称周期性(Periodicity), 指一个模式的重复和每个重复所采取的间歇性规律, 体现了节奏的计时性, 表现为时长、间隔和顺序。节奏在语言韵律和语音中起着组织作用, 是个体感知音节、单词

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和短语边界的重要线索(Kotz et al., 2018; Patscheke et al., 2019)。大量研究表明, 节奏是音乐和人类语言共享的听觉时间加工机制, 背后存在重叠的神经过程(Caccia & Lorusso, 2021; Huss et al., 2011; Fiveash, Bedoin et al., 2021; Nolan & Jeon, 2014)。正常发展(Typical development, TD)的新生儿在出生后不久就能仅依靠节奏线索区分母语和非母语(Mehler et al., 1988; Ramus et al., 2000)。生活在不同语言环境中的正常婴儿都能在出生后第一年生成有节奏的音节(如, da-da-da) (Ravignani et al., 2019)。节奏还对学龄儿童的阅读理解(Goswami et al., 2013)、形态句法能力(Morphosyntax ability)、字母发音知识(Letter-sound knowledge) (Ozernov-Palchik et al., 2018)、单词阅读能力(Tierney & Kraus, 2013)、语音意识(Phonological awareness) (Flaugnacco et al., 2014; Huss et al., 2011; Sun et al., 2022)和书写能力(Pagliarini et al., 2015)等有重要影响, 并表现出跨语言一致性(Bekius et al., 2016; Lundetrae & Thomson, 2018)。因此, 能否正确认别节奏是儿童语言习得的一个关键指标(Bégel et al., 2022; Kalashnikova et al., 2021)。相关研究将节奏/节拍/节拍敏感性明显弱于正常同龄人平均水平的现象称之为节奏异常(Atypical rhythm)。节奏异常风险假说(Atypical rhythm risk hypothesis)认为节奏异常的个体出现发展性言语/语言障碍(如 DD)的风险更高(Ladányi et al., 2020)。有关节奏异常可能是 DD 风险因素的探讨已成为近年学者们关注的热点。

最新研究表明, 预测性计时缺陷(节奏的成分之一)可部分解释核心语音缺陷(Bégel et al., 2022), 而个体早期的上升时间感知能力(节奏感知线索)不足也会阻碍后期语音发展(Kalashnikova et al., 2019)。由此推测早期节奏异常引发的语音缺陷可能会导致 DD。值得注意的是, 神经回路还未成熟的早产儿就已经能对节拍或节拍序列进行编码了(Edalati et al., 2023)。这说明, 个体在婴儿时期就已具有一定的节奏感知能力, 这在时间上早于语音意识和其他语言能力发展。节奏干预研究发现, DD 儿童的节奏与阅读能力之间存在因果联系。例如, Bégel 等人(2018)和 Cancer 等人(2020)使用计算机技术对 DD 成年人和 DD 儿童进行节奏训练, 结果证实了节奏训练对两组 DD 参与者的语音意识都有促进作用。为了对比节奏训练和语音

训练对 DD 听觉加工干预的效果, Thomson 等人(2013)的对比研究发现, 节奏训练对 DD 语音意识的促进作用和语音训练相当。

目前, DD 早期识别并无可靠工具, 而节奏异常可能对 DD 的早期预测和识别具有重要意义。在早期尤其是学龄前期及时发现并进行干预, 能有效改善 DD 语言相关技能的发展轨迹(Helland et al., 2021; Vidal et al., 2020; Virtala & Partanen, 2018), 降低发病率(Sanfilippo et al., 2020)。关于 DD 儿童有哪些方面的节奏异常, 这些异常特点作为潜在早期识别标志的可能性如何, 还有待进一步探讨。本文将总结近年来 DD 儿童节奏异常的行为和神经活动研究证据, 概括 DD 儿童节奏异常的特点, 分析将节奏异常作为识别 DD 儿童早期标志的可能性, 为早期识别及干预提供一些新思路。

## 2 DD 儿童节奏异常的表现

个体节拍感知能力出生即有(Winkler et al., 2009), 新生儿和婴儿就已能够在音乐刺激中处理节奏(Fiveash, Falk et al., 2021; Hannon & Trehub, 2005; Ladányi et al., 2020)。Mittag 等人(2021)的脑磁图(MEG)研究发现, 12 个月的 DD 风险婴儿(具有 DD 家族患病史的婴儿)对非言语声音刺激(白噪声)的神经反应比 6 个月时更大、更长, 这与 TD 儿童的典型反应发展模式恰好相反。这表明, 在母语音素学习的敏感期, DD 风险婴儿的听觉加工效率更低, 对简单声音反应更迟钝。后续的研究发现, DD 风险婴儿的听觉加工缺陷持续预测 18 至 30 个月的句法处理和 18 至 21 个月的词汇生成。因此, 婴儿早期对简单声音的反应也许能作为识别 DD 的早期风险因素, 如听觉加工缺陷引发的节奏异常的行为表现和神经反应。本文将从感知行为和神经活动两个层面对 DD 儿童节奏异常的表现进行总结梳理, 以期为 DD 儿童早期识别提供证据。

### 2.1 DD 儿童节奏异常的行为特点

DD 儿童的节奏能力普遍低于年龄匹配的 TD 儿童(Bégel et al., 2022; Cutini et al., 2016; Huss et al., 2011)。节奏能力通常表现为个体对简单节拍和节奏序列的感知及生成, 需要分组间隔时间预测和声学线索上升时间感知的帮助。因此, DD 儿童在节奏感知、生成、预测间隔时间及上升时

间感知方面的行为表现能够有效反映其节奏异常的特点。

### 2.1.1 节奏感知能力差

节奏感知包括对简单节拍和节奏序列的感知，涉及对重音与非重音交替规律的判断和复杂节奏规律的感知。DD儿童表现出节奏感知能力缺陷。例如，Holliman等人(2010b)使用修订后的重音误读任务(Revised stress mispronunciations task)来研究儿童是否能从发音错误的单词中恢复正确的重音分配。任务中，儿童需要在听到重音被误读的目标词(如，‘singer’(‘sɪŋə)读作‘sn’ger’(səŋə’ʒə))后，尝试恢复正确的重音位置，然后从4张图片中找出重音位置正确的目标词。研究结果发现，与年龄匹配(约12岁)的TD儿童相比，DD儿童对重音(Stress)和轻音(Weak)音节节奏交替的敏感性更差，表现为正确恢复重音并找到目标词的正确率显著更低。这说明DD儿童的轻重音交替敏感性更差。一项前瞻性研究还发现，8~14岁DD儿童轻重音交替敏感性缺陷随年龄增长而持续存在，且DD儿童音乐序列感知能力发展速度显著慢于年龄匹配的TD儿童(Goswami et al., 2013)。这说明DD儿童存在节奏感知能力缺陷，且不受年龄和学习经验影响。

### 2.1.2 节奏生成困难

节奏生成表现为节奏同步或再现，反映了个体内部节奏运动与外部节奏刺激的协调，包括从手指与节拍器同步敲击到音乐合奏表演。已有研究表明，DD风险婴儿19个月时会出现音节生成缺陷(Ozernov - Palchik & Gaab, 2016)，这远早于DD儿童语言和阅读障碍的出现时间。DD儿童的节奏同步一致性比同龄TD儿童更差，表现为不能有效编码非语言节奏拍模板，手指敲击再现简单运动节拍和无意义音节节拍都有困难(Colling et al., 2017; Ladányi et al., 2020; Overy, 2003; 王润洲, 毕鸿燕, 2021)。节奏序列再现研究发现，DD儿童表现出再现语音节奏和3~4个以上音节序列的困难(Wolff, 2002)，出现单手敲击显著延时，双手联合敲击时长显著缩短的异常表现(Caccia & Lorusso, 2021; Calet et al., 2019)，且再现错误率显著高于TD儿童，表现出轻拍过慢的特征，有明显的漏拍倾向(Overy, 2003)。这也许可以解释DD儿童双手联合完成节奏再现任务时时长显著缩短的现象。

### 2.1.3 预测时间间隔更长

预测时间(Predictive timing)，指听者根据已有信息对即将发生的事件所建立的时间预期(Piras & Coull, 2011)，常被用来衡量听者感知声音信号变化本身所传达的细微差别的能力(Arvaniti, 2009)，帮助听者在声音信号规律性并不完美时提取节奏模式。新生儿就可以对听觉节奏规律进行时间预测(Winkler et al., 2009)。研究发现，在正式阅读教育开始前，DD风险儿童的预测技能可能就已经受损(Pagliarini et al., 2015)。Bégel等人(2022)对8~12岁的DD和TD儿童进行对照研究发现，预测时间可以独立于一般运动和认知功能，部分解释核心语音缺陷，使得预测时间成为DD早期诊断和补救的宝贵工具(Lampis et al., 2021)。

有研究发现，当DD儿童必须与外部节拍器同步时，其预测时间间隔比TD儿童的反应时长3~4倍(Wolff, 2002)。另外，DD儿童对节拍的预测能力也相对较弱，表现为当节拍器速率发生变化时，其同步节拍速率校正反应时更长，且难以重现正确的节奏序列模式(Thomson & Goswami, 2008)。相关的脑神经成像研究也证实了预测时间缺陷是DD儿童节奏异常的重要特征之一。例如，Meng等人(2005)以中国内地的汉语DD儿童为被试，使用被动oddball范式，发现DD儿童对新异时间间隔刺激诱发的失匹配负波(Mismatch negativity, MMN)的平均波幅小于正常儿童。失匹配负波是早期感知能力的有效指标，可精确测量大脑感知听觉信息的灵敏度(Näätänen, 1990)。van Zuijen等人(2012)的EEG研究发现，DD风险幼儿在加工新异时间间隔刺激时没有诱发显著的失匹配反应(Mismatch response, MMR，是MMN的派生成分)，但是控制组幼儿出现了显著的MMR，从反面证明了DD儿童存在的预测新异时间间隔缺陷。这表明预测时间间隔能力缺陷可能是DD的重要风险因素，表现为DD儿童存在较长的预测时间间隔和较弱的新异间隔刺激神经反应。

### 2.1.4 上升时间感知困难

上升时间(Rise time)是声音信号达到最大振幅所需的时间，是最重要的声学感知线索之一，与重音定位密切相关，对应的行为是上升时间感知(Goswami et al., 2010; Hääläinen et al., 2012)。Attaheri等人(2022)使用皮层跟踪技术，对婴儿在

自然语音(童谣)聆听过程中的声学编码和语音编码能力进行直接神经测量,结果发现4个月前的婴儿就已具备声学编码能力,且不随年龄增强。直到7个月婴儿的语音编码能力才开始出现,并随年龄逐渐增强。由此推测,婴儿辨别“pa”和“ba”等音节的行为显示的可能是婴儿的声学编码能力,而非语音编码能力。由此分析,有关DD风险或确诊儿童的类似研究中(Kalashnikova et al., 2018; Keshavarzi et al., 2022; Power et al., 2013),他们不能区分两个声音的差异,可能源于早年的声学编码缺陷,而非只因随时间发展不足的语音缺陷。

此外,听觉行为科学研究表明,上升时间感知也是语音编码发展的基础机制之一。为了测量DD儿童的上升时间准确度,Goswami等人(2010)创造了“DeeDee”任务范式,将包含名人名字(如,David Beckham)和电影及书名(如,Harry Potter)的口语材料中大部分语音信息移除,仅保留原始单词、短语的重音和节奏模式。测试过程中,给儿童看语音对应的图片,同时用“DeeDee”声音信号讲出对应的语音信息,如“Harry Potter”用“DEEdeeDEEdee”表达,让DD儿童匹配声音对应的图片。结果发现,与年龄匹配的TD儿童相比,12岁DD儿童的“DeeDee”任务匹配正确率明显更低,但与阅读水平匹配的低龄TD儿童水平相当,这意味着DD儿童的上升时间感知能力更弱。事实上,DD儿童可以区分音素相关的非常快速的上升时间(例如,15ms),但不能区分节奏相关的较慢的上升时间(如300 ms)(Richardson et al., 2004; Stefanics et al., 2011),造成较慢上升时间所携带的语音信息流失,出现语流切割困难(Goswami et al., 2011)。因此,上升时间感知困难早于DD症状出现,并且普遍存在于DD患者中,所以上升时间感知困难可能是DD儿童的核心缺陷之一,可作为口语和书面语损伤的重要发展性标志进行早期观察和识别(Kalashnikova et al., 2019)。

从以上分析可见,DD儿童在完成节奏感知与生成任务时,表现出区别于正常儿童的行为特点,分别是节奏感知和生成能力差、预测时间间隔更长、上升时间感知困难。这些表现构成了DD儿童在行为层面的节奏异常特点,可作为DD儿童的早期识别标志。

## 2.2 DD 儿童节奏异常的神经特点

与行为研究对观察者要求较高,且无法避免

主观偏差的不足相比,神经活动研究更为客观。而且即使外在行为还未出现的早期或被掩饰的情况下,依然可以借助科学仪器或技术观察到相应的神经反应。Sanfilippo等人(2020)从遗传和神经成像研究出发,认为DD具有的可遗传性,可能代表着DD风险婴儿大脑异常在正式学习阅读之前就已存在。因此,节奏异常神经成像技术与关键行为相结合,可以提高识别学龄前儿童阅读障碍风险的准确性(Ozernov-Palchik & Gaab, 2016),尤其是节奏生成能力较弱的新生儿与学步儿。当前的脑神经研究发现,大脑节律将孤立的神经元细胞联系并组合在一起,进行信息加工和传递(Buzsáki & Vöröslakos, 2023)。DD儿童普遍存在的节奏感知困难,可能是由语音信号和神经元活动间相位夹带受损,低频振幅调制与外部声音信号频率不同步造成的(Flaugnacco et al., 2014),也可能与大脑的听觉和运动区域耦合不足有关(Fiveash, Bedoin et al., 2021)。使得DD儿童的脑神经活动出现 $\delta$ 波段神经夹带异常、低频振幅调制同步性低及听觉-运动耦合异常的特点。

### 2.2.1 振幅调制相位层次缺陷: $\delta$ 波段神经夹带异常

DD儿童的上升时间感知缺陷与神经振荡频率和语音流的异常夹带有关(Huss et al., 2011; Leong et al., 2011; 陈梁杰等,2022),尤其是低频 $\delta$ 波段夹带异常,会影响听觉重音和节奏模式识别(Lallier et al., 2018; Lizarazu et al., 2021; Power et al., 2013)。神经振荡(Neural oscillatory)是神经元产生的有规律地反复出现的抑制性和兴奋性电活动模式(György, 2019),与预测加工、时间注意和跟踪外部节奏刺激密切相关。神经元电活动模式与外部感官信息输入(如听觉信号)在规律性上保持一致,就是神经夹带(Neural entrainment),可以帮助听者获取和加工外部语音信息(Goswami & Leong, 2013)。研究发现DD患者的大脑可能无法建立 $\delta$ 频段(~2 Hz)节拍的可靠内部声学表征,而这是产生节奏的主要频段(Huss et al., 2011)。详细来说,与TD儿童相比,DD儿童在有节奏的语言信号神经夹带中, $\delta$ 波段的振荡相位比TD儿童的振荡相位“滞后”约12.8 ms(Goswami, 2019a), $\delta$ 波段的最优相位(Preferred phase,反映了在一个时间周期内大多数神经元放电的时间点)峰值出现更早,导致语音包络表征准确性更差(Power et al.,

2013)。这种相位延迟和较早出现的峰值,会影响由 $\delta$ 振荡控制的较快波段(如 $\gamma$ 波段)振荡的保真度,从而降低节奏和语音感知准确性(Goswami, 2019b)。不仅如此,DD 成人的右半球 2 Hz 频率活动区域的神经夹带明显减少,且右半球整体神经夹带显著降低(Hämäläinen et al., 2012)。这可能意味着早年的 $\delta$  波段神经夹带异常并不会随着年龄和学习经验的增加而自然消失(Gibbon et al., 2021)。

### 2.2.2 大脑低频带振幅调制同步性低

DD 儿童的节奏处理异常可能与大脑低频神经振荡和低频带声音信号同步不一致有关。大脑神经元以不同的速率从语音流中获取信息的时间“样本”,使不同频段的神经振荡与语音信息的相似声波频率不断进行同步和相位锁定(Phase locking),即大脑神经活动和受到调幅(Amplitude modulation, AM)驱动的语音节奏模式之间的自动对齐(王润洲, 毕鸿燕, 2021)。相关研究发现,新生儿就已具备大脑低频振幅调制同步的能力,且皮层追踪发现在出生后第一年 $\delta$  频带的神经活动最强,这可以预测语言发展的个体差异(Attaheri et al., 2022)。DD 儿童和 TD 儿童语音听觉神经振荡同步性的脑区存在明显差异。具体来说,首先,对照研究发现 DD 风险儿童在左额叶区域(The left frontal region, FGL)显示出更大、更持久的异常听觉同步反应(van Zuijen et al., 2012),这可能意味着更低效的大脑振幅调制同步性。其次,与 DD 儿童相比,同龄 TD 儿童在节奏加工时调动了包括左颞区(The left temporal gyrus, Temp.L)在内的多个大脑区域,而 DD 儿童的左颞区(Temp.L)活动却相对不足(Mittag et al., 2021; Shaywitz et al., 2002)。更重要的是,DD 儿童从右侧听觉皮层(AC.R)到左侧额下回(IFG.L)的 $\delta$  波段内表现出大脑神经元活动与语音信号的同步性降低,连接也明显比 TD 儿童更弱(Lallier et al., 2017; Martinez-Murcia et al., 2020),但大脑激活范围可能存在任务间差异。这些结果显示了 DD 儿童的右脑(The right hemisphere, RH)神经活动与低频(约 1~3 Hz)听觉调制的低同步性如何通过节奏异常来影响左脑(The left hemisphere, LH)的语言活动,但其具体的作用方式及机制仍需进一步探究。

### 2.2.3 听觉-运动耦合差

听觉-运动耦合(Sensorimotor coupling)反映了大脑在听音乐或语音节奏时,运动皮层内区域

的激活,包括辅助运动区(SMA, Supplementary motor area)、前辅助运动区(pre-SMA)和前运动皮层(Premotor cortex)(Fiveash, Bedoin et al., 2021)。这种听觉-运动耦合,在婴儿语言发展中起着核心作用,也是节奏感知和生成的基础机制之一(Bruderer et al., 2015)。

有关婴儿和前阅读阶段儿童的神经成像研究发现,大部分阅读相关的脑区很可能在产前或在接受阅读教学和确诊为 DD 前就已经发生异常(Im et al., 2016; Ozernov-Palchik & Gaab, 2016)。如 DD 风险儿童的大脑感觉区域皮质显著更薄,听觉加工相关的脑皮层沟回形态(Sulcal patterns, 指初级皮层褶皱的排列、数量和大小)异常,且 DD 儿童相应的脑区功能及动态连接也表现出异常(Im et al., 2016)。如,在 Li 等人(2022)的功能性磁共振成像(fMRI)研究中,通过使用滑动时间窗方法,对汉语 DD 和 TD 儿童的全脑网络、阅读网络及单边连接等多个维度的时间变异性进行比较发现,DD 儿童的动态 FC (Dynamic functional connectivity) 的改变与异常的区域活动及功能-结构耦合有关。同样的,如果使用具体的节奏任务(如序列学习,即要求被试根据屏幕上依次呈现的刺激进行相应的按键反应)后,DD 儿童的小脑 VI 区的激活显著弱于正常读者(Menghini et al., 2006; Yang et al., 2013)。这与先前的研究结果一致。

以上研究均表明,DD 儿童的节奏异常可在神经活动层面被观察和检测到,并且在婴儿期节奏感知神经特征就已经可以被记录下来,表现为 $\delta$  波段神经夹带异常、低频振幅调制同步性低、听觉-运动耦合异常。这些指标可用于分析其节奏能力是否正常,以便更早识别 DD 风险儿童。

## 3 节奏异常作为 DD 儿童潜在早期识别标志的可能性

综合已有研究结果发现,节奏异常通过不同的方式从不同层面对 DD 儿童的文字阅读困难产生影响。考虑到节奏是语言与阅读发展的影响因素之一,节奏异常和 DD 的因果关系不容忽视。分析节奏异常对 DD 文字阅读困难的具体影响过程,将有利于进一步厘清两者关系,增加通过节奏异常特点尽早识别 DD 的可能性。

### 3.1 节奏异常阻碍早期单词解码

学龄初期儿童的阅读发展主要集中在对词汇

的识别和解码方面(Adams, 1994)。解码是将字母映射到声音进而阅读单词的过程,有助于正字法词典(orthographic lexicon)的形成(Lallier et al., 2018),也是单词识别和随后阅读的基础(Ozernov - Palchik & Gaab, 2016)。在自然语言中,重读音节比非重读音节持续时间更长,声音更大,音调也更高(Lallier et al., 2018),这些特征使得重音成为识别单词边界的重要条件,阅读时读者需要利用这些线索将单词分割成音节帮助解码(Goswami, 2019b; Lundetrae & Thomson, 2018)。重音识别能力常通过节拍同步来测量。Carr 等人(2014)的研究发现,与节拍同步能力较差的同龄人相比,能够更好地与外部节拍同步的儿童具有明显更好的语音加工能力,这与他们更好的重音定位能力密切相关。因此,要想更好地识别和干预DD,必须厘清 DD 儿童节奏异常和解码能力之间的关系。与 TD 儿童相反,DD 儿童多数的阅读和拼写(听写)失败都源于节奏感知缺陷带来的解码失败(Calet et al., 2019)。研究发现,有节奏加工能力缺陷的 2 至 3 岁 DD 风险儿童在个体早期就已表现出每秒音节产生数明显更少(3 岁时 DD 儿童 4.8 个, TD 儿童 7.1 个),发音间隔时间也更长(Smith et al., 2008),这会导致他们解码时不能准确捕捉重音线索,导致解码失败。对重音感知敏感性的回溯研究发现,与无 DD 患病史的同龄人相比,DD 青少年的重音敏感性明显更低(Kitzen, 2001),致使他们不能很好辨识模糊音素(Holliman et al., 2010a)。这些结果都说明了节奏产生异常时,解码能力也会受到影响(Calet et al., 2019; Snowling et al., 2019)。

### 3.2 节奏异常影响 DD 儿童的阅读理解

随着年级的增加,对儿童阅读理解的要求变得更高。简单阅读观(the simple view of reading, 简称 SVR)认为解码是阅读理解的基础之一(Edele & Stanat, 2016),阅读时读者需要在字素(印刷的单词)和音素(声音)之间建立联系(Pagliarini et al., 2020)。因此,节奏技能缺陷可以通过降低解码效率而造成阅读理解困难(Goswami et al., 2013; Reifinger Jr, 2019)。另外,一个高效、快速的读者在阅读当前单词时,就必须预测接下来的单词信息,为连续的阅读做准备(Laubrock & Kliegl, 2015)。因此,预测也是保持阅读理解准确和流畅的重要条件。但如上文所述,DD 儿童存在的预测时间缺

陷,使他们不善于为未来的阅读事件做准备(Pagliarini et al., 2015; Taha et al., 2022),导致阅读理解困难。例如, Pagliarini 等人(2020)使用“Warning imperative paradigm”范式首次对 DD 儿童和成人的结构预测进行研究,结果发现 DD 儿童和成人的预测反应时低于 TD 同龄人,且每秒阅读的音节也更少,降低了阅读效率。进一步研究发现,即使接受正式的阅读教学后,DD 儿童的预测缺陷依然会阻碍他们有效利用形态句法信息(Morphological information)预测即将出现的单词及复杂的语言结构,难以保证阅读的流畅性和准确性(Persici et al., 2019)。这些结果表明,DD 儿童的阅读理解困难与其节奏感知异常密切相关。

### 3.3 节奏异常影响 DD 儿童的书写效率

越来越多研究发现,在字母、词汇到语篇等多个阅读水平上,不同文字系统中的 DD 患者都表现出书写困难的特征,具体表现为书写速度明显较慢,平均字符大小和大小变化更大,写作的准确性明显较低,汉字书写中还出现笔画缺失和连笔等现象(Lam et al., 2011; 卫垌圻 等, 2020)。有研究者认为,书写过程中频繁的不恰当停顿可能是 DD 儿童书写困难的关键(Sumner et al., 2014; 卫垌圻 等, 2020)。书写是一项具有节律性的活动,从儿童最初的书写开始,节奏结构似乎就已存在于儿童的心智模型中(Pagliarini et al., 2017),受到等时性和同质性两个节律性原则影响(Llinás, 1993)。等时性是指个体书写时可自发调节每个字母(笔画)的书写时间,以保证形状大小不同的同一单词(汉字)的书写时间近似恒定。同质性是指每个单词(汉字)的组成字母(笔画)的书写相对持续时间不变。与同龄 TD 儿童相比,DD 儿童在书写单词的单个字母所花费的时间明显更长(Pagliarini et al., 2015),他们不能根据要求调整单个字母的书写时间和整体书写速度,进而难以在有限的时间内准确流畅的完成一系列与书写内容相关的节奏事件(Cheng-Lai et al., 2013)。此外,DD 儿童在与节奏能力密切相关的语音和正字法技能方面也存在缺陷,使得他们需要花更多时间思考音素-字素映射,从而导致更频繁的停顿,书写速度自然就会减慢,准确性和流畅性也相应降低(Sumner et al., 2013; 卫垌圻 等, 2020)。可见,DD 儿童的书写质量与其节奏感知能力密切相关。

基于上述分析,节奏能力在解码、阅读理解

和书写效率方面均有着重要作用。节奏异常的个体，解码效率更低，阅读理解更吃力，书写质量也更差，可见，DD 儿童节奏能力异常可预测其在阅读加工层面的缺陷，这也充分说明了节奏异常可能是 DD 更早期更深层次的风险因素，对 DD 的早期识别与干预有着重要价值。

## 4 研究展望

综上所述，节奏异常是个体阅读发育异常的重要指标，对早期节奏的深入理解有助于 DD 的早期发现和识别(Ladányi et al., 2020)。但有关 DD 节奏异常的研究尚不成熟，尤其需要对节奏异常和 DD 的关系进行深入探讨，以丰富当前 DD 相关的研究结论。还需要注意，由于 DD 患者群体存在多质性特征，需要通过更广泛的研究进一步确认节奏异常在多大程度上能够解释 DD 患者的个体差异。此外，相关的测量研究也还停留在实验室阶段，尤其是对早期婴幼儿的研究多采用脑神经技术，这在可行性和成本方面存在较大限制。因此，未来研究应考虑到以下四个方面。

### 4.1 探究汉语 DD 儿童的节奏异常特点及作用机制

目前已有较多研究都证实了节奏异常可能是 DD 儿童的早期风险因素，并对其内在的作用机制进行了探讨，但是这些研究结果大多来自字母语言文字系统，而有关非字母语言文字系统的研究较少，尤其是汉语 DD 节奏异常的研究则更少。汉语 DD 儿童也表现出解码、阅读和书写障碍，尤其是书写障碍已被列入汉语 DD 的诊断标准(Cheng-Lai et al., 2013)。与字母语言强调书写形式的流畅性和连续性不同，汉语书写对笔画准确性要求更高(Alamargot et al., 2020; Lam et al., 2011)。比如汉字包含笔画的急转弯，需要频繁提笔(Tseng, 1998)，而且连续汉字之间并没有像英语单词一样用于区分的空白，这些独特性又是如何通过节奏异常对 DD 儿童的文字阅读困难产生影响，其作用机制如何都亟需深入探讨。因此，未来研究应该深入拓展对非字母语言文字系统中 DD 儿童的节奏异常特点及其对文字阅读困难的影响展开研究，也可考虑纳入婴幼儿早期绘画运动节奏测量，对个体早期书写活动中的节奏特点进行探索，进一步揭示两者因果关系，为更早地通过节奏异常识别 DD 风险儿童提供更广泛的实践和理论依据。

### 4.2 纵向追踪探究 DD 儿童节奏异常的个体差异

DD 多因素理论(Pennington, 2006)认为，DD 患者是一个异质性的群体，具有较强的个体差异，存在各种潜在的损伤模式(McArthur et al., 2013; Pennington et al., 2012)，而且不同风险因素起作用的时机和大小也因人而异(Goswami et al., 2021)，但目前有关 DD 儿童个体差异的研究还处于起步阶段。此外，尽管 DD 诊断和治疗方式各异，但众多研究一致表明，早期识别可以发现 DD 患病风险，适当干预可以帮助风险儿童克服风险迹象(Alonzo et al., 2020; Helland et al., 2021; Ladányi et al., 2020)。有关个体早期节奏能力发展的研究发现，婴儿期的节奏训练可以增强大脑听觉-运动耦合，这种耦合反过来又促进节奏能力发展(Cirelli et al., 2016)。根据 Goswami (2003), Goswami 等人(2021)的观点，从个体早期开始的纵向研究是找到导致 DD 风险因素的最佳方法。因此，有必要采用长期的追踪研究方式，深入探究节奏异常与 DD 儿童阅读困难之间的相互关系，发掘节奏影响人类语言与阅读发展的更深层机制，为设计更具针对性的早期识别和干预方案提供更充分的理论支持。

### 4.3 探索将节奏异常纳入基于最具预测性声学参数集的机器学习分类模型

正如前文所述，节奏常用分析指标为声音信号与神经振荡夹带的相位一致性程度。近期也有研究采用 EEG 记录的图像信息，使用复杂网络分析方法对 DD 儿童进行分类预测(Gallego-Molina et al., 2022; Martinez-Murcia et al., 2020; Ortiz et al., 2020; Rezvani et al., 2019)。交叉验证显示，在区分 DD 和 TD 儿童时相位-振幅耦合(Phase-Amplitude coupling, PAC)显示出良好的分类准确性(Martinez-Murcia et al., 2020; Rezvani et al., 2019)。Smoller 等人(2019)认为，通过音乐节奏处理测量的计时技能受损，与其他已知和尚待确定的风险因素结合在一起，可以作为预测语言/言语障碍的风险因素集。例如，对儿童进行了一系列脑电(EEG)实验，让他们听带有慢节奏韵律(0.5~1 Hz)、音节(4~8 Hz)或音素(12~40 Hz)频率的调幅噪声，检测与 DD 相关的振荡采样感知差异。结果显示该方法有效识别 DD 的准确率为 80% (Martinez-Murcia et al., 2020)。Rezvani 等人(2019)使用 29 名 DD 儿童和 15 名 TD 儿童的脑电静息

状态数据, 利用相位滞后指数(Phase Lag Index, PLI)计算了多个频带的加权连通性矩阵, 依据来自不同频段的局部网络特征, 对儿童的分类准确率达到 95%。目前, 研究者们探究了不同状态和频段的语音声学参数对 DD 的预测准确性, 但是涉及早于语言出现的节奏中最具预测性的声学参数尚不清晰, 可考虑进一步细化节奏相关声学参数, 用以印证行为特点, 帮助非专业诊断人员识别 DD。另外, DD 研究还发现了男童和女童在发病率和发病时间上存在显著的性别差异(Berninger et al., 2008; Brandlistuen et al., 2021; Helland et al., 2021)。未来研究可探索节奏能力是否存在性别差异, 如果有, 可尝试将其纳入机器学习算法帮助 DD 自动识别建模。

#### 4.4 注重早期节奏测量的适用性, 提高生态效度

当前 DD 儿童节奏研究中使用的研究材料多是为突出节奏信息而专门设计的声音材料, 信息组合和呈现方式都局限于实验室环境, 不宜大范围推广。未来研究可以从节奏声音材料入手, 选取更接近自然环境的真实声音作为实验刺激, 如适合婴幼儿使用的童谣、儿歌中的节奏序列片段(Attaheri et al., 2022; Suppanen et al., 2019), 提高研究结论和测量方式的生态效度。鉴于音乐和语言有着共享的神经加工机制, 因此异常节奏感知也可以使用音乐节奏感知任务来测量, 比如使用音乐节选测试节奏辨别能力(Gordon, 2002)。一项最新研究中, Edalati 等人(2023)使用音乐序列转录任务(MSTT, Musical sequence transcription task)在课堂环境中纵向评估了儿童二、三、五年级的节奏序列加工能力, 在吸引和激励儿童积极参与实验的同时, 还大大提高了研究方法和结果的可推广性。另外, MSTT 与文化无关, 无论语言背景和识字能力如何, 都可以进行测量。当然, 节奏任务可以首先应用于学龄前儿童和学龄儿童的临床筛查。当有更多可靠的婴儿节律测试可用时, 再扩展到婴儿筛查, 以帮助非专业诊断人员, 如家长、教师、社会工作人员等进行大范围初筛, 然后再将具有节奏异常特点的儿童纳入专业测试和诊断, 提高 DD 儿童识别率和诊断率, 减少漏诊和误诊。

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## Potential early identification markers for children with developmental dyslexia: Atypical rhythm and its characteristics

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**Abstract:** Early identification and intervention of children with developmental dyslexia (DD) are critical to both individual and social development. The phonological awareness deficit is the core defect of DD, which is essentially caused by the more basic auditory processing deficit. Rhythm, as one of the main factors affecting auditory processing, occurs in early life and is one of the key indicators of children's language acquisition. Combing through previous studies, it is found that DD children show behavioral and neural characteristics of atypical rhythm, and these characteristics will lead to lower efficiency of individual decoding, more laborious reading, and poorer writing quality. Atypical rhythm perception in children with DD predicts deficits in reading. Therefore, atypical rhythm characteristics can be considered as potential identification markers for DD children before formal enrollment. Future studies can take atypical rhythm as the entry point, deeply explore the individual differences of atypical rhythm in DD children, actively explore the characteristics and mechanism of atypical rhythm in Chinese children, and provide empirical and theoretical basis for developing more ecological validity of rhythm measurement tools and improving the identification efficiency and intervention measures of DD.

**Keywords:** developmental dyslexia, early identification markers, atypical rhythm