Some research finds immature EMG recordings tend to suggest feeding nonverbal, oral suggestion that developmental dyspraxia and language development are related to immature speech function even by 14 years of age. 

Some explanations for this might be that the development of language systems, especially grammatical structures, are separate from other abilities. Language development as measured by vocabulary and grammar is not related to oral motor development. Children with autism tend to have slower development of oral motor skills. This could be due to an association with vocabulary spurt/onset of grammar, as suggested by Moore (1988) and Landt (1994) in their study of 14 boys and 11 girls who were scored using the Denver Developmental Screening Test (DDST). Oral movements scored by two independent scorers included 10 single movements categories (e.g. stick tongue out again and again, e.g. lick lips) and 10 complex movements categories (e.g. shoe/shoes, e.g. open mouth wide). Each movement was scored on a scale of 0 to 2: 0 (no attempt), 1 (partial attempt), and 2 (successful attempt). 

Overall, there was a significant correlation between vocabulary and movements complexity (0.522) and a significant correlation between vocabulary and function words (0.820). However, there was no significant correlation between vocabulary and content words (0.479). This suggests that different aspects of vocabulary development are associated with different aspects of oral motor development. 

Conclusions and Future Directions: 

- Further research is needed to understand the relationship between oral motor development and language development in children with autism. 
- It is important to develop parental scales of oral movements to better support children in the early stages of language development. 
- Future studies should consider the role of imitation abilities and the use of phonetically similar words in assessing oral motor development.