

## Speech and Language Therapy

# Swallowing Difficulties

Swallowing difficulties, also known as Dysphagia, may result in food and drink going down the wrong way into the airway – this is called aspiration. Someone may also have difficulties with moving food around their mouth or chewing.

### Causes of Dysphagia

Causes of Dysphagia include: head/brain injury, stroke, dementia, critical illness, head and neck surgery, cancer and neurological conditions such as Parkinsons, Multiple Sclerosis, Motor Neurone Disease etc.

### Signs of Aspiration

When food and drink goes down the wrong way, this is called aspiration. Signs of this include:

- Losing food or drink from the mouth;
- Regularly clearing your throat or coughing whilst eating and drinking;
- Experiencing food or drink coming back up after swallowing;
- Having a 'wet bubbling' voice;
- Experiencing breathing difficulties when eating and drinking;
- Eyes watering and a red face when eating and drinking.

Sometimes someone may not show any of these signs although food and drink is going down the wrong way. This is called silent aspiration. A Speech and Language Therapist can further investigate this if felt necessary.



## Patient Information

### **Risks associated with dysphagia**

- Choking;
- Regular chest infections or aspiration pneumonia;
- Malnutrition and/or dehydration;
- Weight loss;
- Reduced quality of life or loss of enjoyment from eating and drinking.

For some, the above risks can contribute to death.

### **Assessment and Management**

A Speech and Language Therapist will assess whether there is an aspiration risk with eating and drinking.

They may suggest changes in the texture or consistency of diet and fluid, position when eating and drinking, swallow technique, or provide swallowing therapy.

If a patient is on modified diet and fluid, a yellow sign from the Speech and Language Therapist will be placed above the patient's bed, giving guidance on the up to date recommendations.

### **What if eating and drinking isn't safe?**

If there is a risk of food or drink going down the wrong way onto the lungs, alternative ways of providing fluids and nutrition may be reviewed by the medical team, such as:

- An intravenous drip, known as an 'IV';
- A nasogastric tube that passes through the nose and down into the stomach, known as a 'NG Tube';
- A tube that passes directly into the stomach. This is most commonly a 'PEG' tube.

For some, the above options may be felt to be unsuitable for a variety of reasons, and therefore it may be considered to continue eating and drinking with the risk of aspiration.

## Patient Information

### Advice for eating and drinking

- Ensure you sit upright when eating and drinking;
- Stay sitting upright for 30 minutes after eating;
- Ensure you are alert. Avoid eating and drinking if very tired;
- Make sure you concentrate on eating and drinking, e.g. turn the TV off, don't talk to others at the same time;
- Take your time, don't rush;
- Take small mouthfuls;
- Make sure your mouth is clear before you have more. You may need more than one swallow to clear a mouthful;
- Avoid mixing food and drink in the same mouthful;
- Avoid using a straw or beaker unless specifically required. These can increase the risk of things going down the wrong way for some people.

If you are having problems swallowing medication, please speak to your doctor for advice.

### Further Information

If you have any questions about the information in this leaflet, please contact the Speech and Language Therapy team on 024 7696 5709.

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 5709 and we will do our best to meet your needs.

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#### Document History

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