Patient Information

University Hospitals Coventry and Warwickshire NHS Trust

Speech and Language Therapy

Eating and drinking with Acknowledged Risks (EDAR)

Swallowing Difficulties (Dysphagia)

Dysphagia refers to difficulty in swallowing. It can be caused by a range of conditions, such as:

- stroke
- neurodegenerative disorders
- head injury
- dementia (including Alzheimer's disease)
- certain types of learning disabilities
- head and neck cancer

When a person has dysphagia, food, drink or saliva can enter the airway and possibly go into the lungs. This is known as an aspiration. This can lead to:

- coughing and choking during or after swallowing
- silent aspiration - where food or liquid enters the lungs without any outward signs or symptoms.
- pneumonia - if food, drink, or saliva enters the lungs, bacteria may cause a lung infection.
- malnutrition and dehydration - if the person is unable to eat or drink comfortably enough to meet their nutritional needs.

Speech and language therapist

Speech and Language therapists specialise in assessing and treating swallowing difficulties (dysphagia). In many cases, they can help find ways to reduce the risks of food going down the wrong way (aspiration). However, for some patients, aspiration may still be a risk even with support.

Eating and Drinking with Acknowledged Risks (EDAR)

Sometimes, tube feeding (through the nose or directly into the stomach) is considered when there is a risk of food or drink going down the wrong way (aspiration) while eating and drinking. However, tube feeding may not be suitable for everyone. This may be because:

- The risks of tube feeding outweigh the benefits
- The patient refuses tube feeding
- Tube feeding would not maintain or improve the person's quality of life

When tube feeding is not suitable, a person with the capacity to make informed decisions may choose to continue eating and drinking. If they lack capacity, the medical team may decide this in their best interests. This is known as Eating and Drinking with Acknowledged Risks (EDAR).

When might EDAR be considered?

Eating and drinking with acknowledged risks (EDAR) may be considered in the following situations:

- If the person is in advanced stages of an illness and wishes to continue eating and drinking to maintain their quality of life.
- The person wants to eat and drink by mouth alongside tube feeding for comfort and quality of life.
- The risks of using feeding tubes are greater than the risks of eating and drinking by mouth.
- The person has made an informed decision to continue eating and drinking.
- The person has an advanced directive or previously expressed a clear wish to follow EDAR if they become unwell.

- Restricting eating and drinking is causing the person high levels of distress.
- The medical team agrees it is the most appropriate option for someone who lacks the mental capacity to make informed decisions about their care.

The decision to eat and drink with acknowledged risks (EDAR) should balance safety and quality of life as much as possible, while also taking the person's wishes into account.

What might happen when eating and drinking with acknowledged risks?

When eating and drinking with acknowledged risks, a person may experience the following:

- recurrent chest infections
- choking or coughing during or after eating or drinking
- difficulty managing saliva
- build-up of food or fluid residue in the mouth
- A wet or gurgly voice after eating and drinking
- increased congestion or shortness of breath when eating and drinking
- weight loss and dehydration.

It is important to note that some people may have no symptoms at all. If you do experience any of the above, you may want to take a break from eating and drinking and try again later. If your health worsens, it may be necessary to discuss future options with your GP or Speech and Language therapist.

Oral care

When eating and drinking with acknowledged risks, it is very important to keep the mouth as clean as possible to remove food residue and reduce the buildup of bacteria.

General guidance to reduce aspiration risk

- Only eat and drink when fully alert.
- Sit upright while eating and drinking.
- Take time to clear your mouth and take small mouthfuls.
- Avoid using straws or spouted cups unless instructed otherwise.
- You may find it more comfortable to eat and drink in small amounts throughout the day.

Further information

If you have any questions about the information in this leaflet, please contact the Speech and Language therapy team:

- Acute Care Team: 024 7696 5709
- Macmillan Head & Neck Cancer team 024 7696 6449

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