

Giving voice to people with swallowing difficulties

Speech and language therapists play an important role in supporting adults who have eating, drinking and swallowing difficulties (dysphagia) to eat and drink safely. They do this by working directly with individuals or indirectly by training others, including families and the wider health and care workforce, to identify and manage problems.

A serious issue

Eating, drinking and swallowing difficulties have potentially life-threatening consequences. They can result in choking, pneumonia, chest infections, dehydration, malnutrition and weight loss. They can also make taking medication more difficult. Swallowing difficulties can result in avoidable hospital admission and in some cases death. They can also lead to a poorer quality of life for the individual and their family. This may be due to embarrassment and lack of enjoyment of food, which can have profound social consequences.

Swallowing difficulties in adults

Dysphagia in adults is associated with a number of different conditions, including:

- Stroke
- Progressive neurological disorders, including dementia, Parkinson's disease, motor neurone disease, multiple sclerosis, and muscular dystrophy
- Cancer, including head and neck, lung, and oesophageal
- Respiratory conditions, including chronic obstructive pulmonary disease, emphysema, and asthma
- Learning disability, developmental and acquired disorders
- Disorders of the immune system
- Traumatic brain injury

Acutely ill patients in critical care beds, including those with cervical spinal injuries and those with community-acquired pneumonia, Guillain-Barré and influenza can also have dysphagia. Acid reflux can also result in swallowing difficulties.

The size of the problem

Dysphagia often forms part of other health conditions for which a person is being treated so it is difficult to be certain of the prevalence rate. However, research has found the following rates of prevalence and incidence:

- ▶ Between **50-75%** of nursing home residents¹
- ▶ Between **50-60%** of head and neck cancer survivors²
- ▶ Between **40-78%** of stroke survivors³ – of those with initial dysphagia following stroke, **76%** will remain with a moderate to severe dysphagia and **15%** with profound dysphagia⁴
- ▶ In **48%** of patients undergoing cervical discectomy and fusion⁵
- ▶ In **33%** of the people with multiple sclerosis⁶
- ▶ In **27%** of those with chronic obstructive pulmonary disease⁷
- ▶ In **10%** of acutely hospitalised older people⁸
- ▶ In **5%** of adults with a learning disability,⁹ **5%** of community-based individuals with learning disabilities and **36%** of hospital-based individuals¹⁰



How speech and language therapy can help

Speech and language therapists have a unique role in the assessment, diagnosis and management of swallowing difficulties. They:

- Play a key role in the diagnosis of dysphagia
- Help people regain their swallowing through exercises, techniques and positioning
- Promote patient safety through modifying the texture of food and fluids, reducing the risk of malnutrition, dehydration and choking
- Promote quality of life, taking into account an individual's and their families' preferences and beliefs, and helping them adjust to living with swallowing difficulties
- Work with other healthcare staff, particularly dietitians, to optimise nutrition and hydration
- Educate and train others in identifying, assessing and managing dysphagia, including families and the wider health and care workforce

The impact of speech and language therapy

Early identification and management of dysphagia by speech and language therapists improves quality of life, and reduces the possibility of further medical complications and death. Improved nutrition and hydration have an impact on physical and mental wellbeing. In addition, speech and language therapy for those with dysphagia also produces economic benefits and savings for the wider health economy, including through avoided hospital admissions.

Economic impact research showed that every £1 invested in low intensity speech and language therapy for adult stroke survivors with swallowing problems generates £2.30 in healthcare savings through avoided cases of chest infections.¹¹

15% of hospital admissions of people with dementia with dysphagia could be prevented by contributions from a speech and language therapist at an earlier point.¹²



Alan's swallowing problem

When Alan became dizzy, unable to walk in a straight line and lost the ability to swallow, he went to hospital where he was diagnosed as having had a mild stroke. A few days later and still unable to swallow, he required a percutaneous endoscopic gastrostomy tube in order to consume food, fluids and medication. Alan describes his experience as 'dreadful and frustrating'. His wife of nearly 50 years had recently died and, still grieving, this felt like a new low.

Shortly after, Alan met his speech and language therapist, Andrew. Together, they worked on a variety of daily exercises to regain his ability to swallow. Alan began to make swift progress and now back on solid food, he hopes to have his feeding tube removed soon.

Alan attributes his progress not only to the exercises but to the enthusiasm and support of Andrew. He says: "Until it happens to you, you don't realise how many people benefit from speech and language therapy. Without Andrew's help, I believe I would still be unable to swallow. Thanks to him life is slowly returning to normal."

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