

Risk feeding



Your speech and language therapist is:

You can contact them on:



Information and advice leaflet

www.lewishamandgreenwich.nhs.uk

Unsafe swallowing

Swallowing problems (dysphagia) may result from dementia, stroke, various neurological disorders (such as Parkinson's disease, multiple sclerosis, motor neurone disease), COPD, learning disability and a range of other acute and chronic health conditions.

If you or your relative is experiencing swallowing difficulties, there may be a high risk of food, fluid and saliva **'going down the wrong way'**. This is when it enters the wind pipe or lungs. **This is known as aspiration**. Aspiration can be uncomfortable, although sometimes it happens with no immediate signs or symptoms (silent aspiration). Aspiration can be dangerous as it can lead to pneumonia (an infection in the lungs) or choking.

Speech and language therapists specialise in the assessment and treatment of dysphagia and in many cases are able to find ways to **reduce the risks** for people with swallowing difficulties.

However, for some patients, even with this support, their swallow is just not safe.

Alternative nutrition and hydration

There are many people, who despite having an unsafe swallow, are unsuitable candidates for tube feeding or alternative nutrition and hydration (ANH) for the following reasons:

- The risks of long term tube feeding outweigh the benefits
- The patient does not give informed consent for tube feeding
- Tube feeding would not maintain or improve the patient's quality of life.

"Risk feeding" should be considered when patients have an unsafe swallow on all food and drink and are not suitable for tube feeding.

Risk feeding

When a person continues to eat and drink despite a risk of aspiration this is referred to as risk feeding. Risk feeding may be put in place for one or more of the following reasons:

of the following reasons:

- Advanced stages of illness
- The person's swallow is not safe and is unlikely to improve
- When preferred food and drink takes priority over swallow safety
- Tube feeding options are declined or inappropriate
- The person wishes to continue to eat and drink for quality of life.

A risk feeding decision should result in a plan which balances safety and quality of life as equally as possible, taking fully into account the personal, cultural and religious beliefs of the individual.

Management

If a person is risk feeding, a speech and language therapist will recommend ways to manage the risks associated with eating and drinking. These may include:

- Changes to consistencies of food and/or drink
- Support to increase independence with eating and drinking
- Advice about positioning while eating and drinking
- Advice about amounts of food and drink to have
- Advice about speed of eating and drinking
- Regular mouthcare.

The aim of this advice is to reduce distress for the person who is risk feeding, wherever possible. Speech and language therapists are happy to answer your questions and explain the actions you can take to manage risks. You can talk this through at your next appointment or if you have urgent concerns please contact us using the phone numbers on the back cover.

Contact details for your speech and language therapist

Queen Elizabeth Hospital

Stadium Road London SE18 4QH Tel: 020 8836 4975

Lewisham Adult Therapy Team

Ivy House Bradgate Road Lewisham SE6 4TT

Tel: 020 8613 9222

University Hospital Lewisham Lewisham High Street London SE13 6LH

Tel: 020 8333 3004

Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

If you would like this information in another language or another format such as braille, large print or an electronic or audio file, please contact the Patient Advice and Liaison Service (PALS) on **020 8333 3355** for University Hospital Lewisham or **020 8836 4592** for Queen Elizabeth Hospital or email **LG.pals@nhs.net**

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