

The use of thickened fluids in the management of dysphagia

This briefing is a summary of a detailed position paper developed to support speech and language therapists when considering the use of thickened fluids in the treatment and management of service users with dysphagia.

Key points

- There is insufficient evidence to conclude definitively that thickened fluids can prevent or reduce dysphagia-related complications of aspiration pneumonia, dehydration, death, or that they can improve quality of life.
- A personalised care approach should be used with decisions about thickened fluids carefully considered after comprehensive assessment and informed consent.
- When a service user uses thickened fluids, a trial and ongoing review will allow for monitoring of any potential adverse effects and ascertain whether continued use is necessary.
- Thickened fluids are better considered as one of a number of dysphagia management tools.

Potential benefits of thickened fluids

- Reduced aspiration and negative aspiration-related health consequences
- Improved oral motor control
- Taste preference over water
- Improved hydration
- Opportunity to continue drinking fluids and / or engage in dysphagia rehabilitation in the short term, where drinking thin fluids is unmanageable
- May increase participation or enable service users to re-engage in meaningful, ritualistic, spiritual or symbolic drinking-related activities
- May support dignity and quality of life through improvement of oral motor control

In addition, for children:

- Reduced hospital admissions for respiratory problems
- Improved quality of life, fluid intake and resistance to feeding
- Reduced symptoms such as coughing, wheezing, and apnoeas



Potential adverse effects of thickened fluids

- Reduced fluid intake
- Dehydration and urinary tract infections
- Feeling of fullness leading to reduced appetite
- Unpleasant or altered taste and texture
- Increased thirst
- Altered bowel habits and increased risk of necrotising enterocolitis in infants
- Discontinuation of breastfeeding
- Delayed or reduced absorption of certain medications
- Increased swallowing effort
- Increase in post-swallow residue
- Increased risk of adverse pulmonary events from aspirating thickened fluids
- Worsening emotional well-being, health-related and social-related quality of life

Recommending thickened fluids whilst awaiting SLT assessment or for long periods without ongoing monitoring or planned follow up has the potential for increasing the likelihood of unwarranted adverse effects.

Things to consider

- The importance of informed consent and service user choice in decision-making.
- Holistic assessment should balance the individual needs of the service user with the best available evidence of risks and benefits of thickened fluids.
- Avoid over-reliance on what might be seen as common sense rather than assessed clinical benefit and which may influence how thickened fluids are perceived and presented to service users, with the potential for overstating treatment benefits and understating potential risks.
- Considering changes to clinical practice can be understandably challenging, especially if the practice aligns with established service models, professional identity or beliefs, or if there are competing demands on resources.
- Thickened fluids are one of a number of existing tools in the dysphagia practitioner's toolkit. The uncertainty of the evidence surrounding thickened fluids does not preclude their use; however, it is important to communicate this uncertainty to service users and their representatives.

Further information

Visit [rcslt.org](https://www.rcslt.org) to download the full position paper on the use of thickened fluids.