

Dysphagia is more than a swallowing disorder. It can lead to poor nutrition, increase the risk of pneumonia, affect quality of life and diminish the joy of eating. Learn about the significance of this dysfunction and how to read the signs **By Bella Lim**

IN CONSULTATION WITH **AILEEN KELLY**, SPEECH THERAPIST

Hard to swallow

Swallowing difficulties, a condition known as dysphagia, do more than take away the pleasure of eating – it can lead to malnutrition, increase the risk of choking and even lead to pneumonia. According to Aileen Kelly, Speech Therapist, JurongHealth, the condition is on the rise.

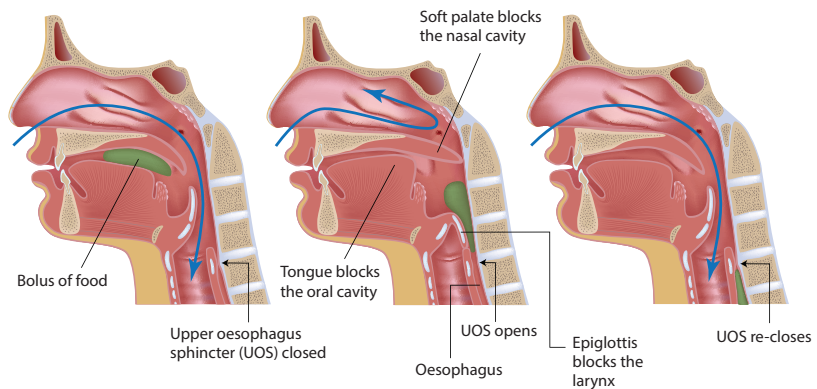
“Dysphagia is a growing health concern in an ageing population,” she said. “The incidence of dysphagia in the elderly is likely to have a significant impact on the cost of healthcare as well as the quality of life.”

A growing concern

Some studies indicate that about 15 per cent of the elderly population is affected by dysphagia. One reason is that as we age, the ‘mechanics’ of how we swallow change. Ms Kelly explained, “As with other muscles in our body, the muscles involved with swallowing also decrease in strength and mobility as we age. This can lead to difficulties chewing, moving the food around our mouths and transferring food to our stomach.” These changes often happen slowly, so there is usually time for healthy people to adapt and continue to swallow safely. However, over time the subtle but accumulative changes in swallowing function can contribute to an increased risk of food and fluids entering the ‘wrong pipe’ – into the airway instead of the food pipe or oesophagus. Dysphagia risk is also higher in those with diseases associated with old age, such as dementia, stroke and Parkinson’s disease as does being on multiple medications.

How you swallow

Many muscles work together to prevent food or water from entering the nose or lungs when you eat or drink. When the muscles involved in swallowing become weak or uncoordinated, food or liquid can enter the wrong ‘pipes’ and cause choking.



Signs of dysphagia

- Difficulty constricting the throat to swallow food or liquids
- Feeling a ‘lump’ of food or liquid stuck in the throat or chest
- Choking or coughing when swallowing
- Food or fluid ‘coming back up’ through the throat, mouth, or nose after swallowing
- Pain when swallowing
- Feeling pain or pressure in the chest when eating
- Weight loss due to the inability to swallow

Therapy & treatment

Management of swallowing impairment is a team effort with a speech therapist playing a central role.

“Intervention for swallowing difficulties can be either compensatory or be a more intense rehabilitation,” said Ms Kelly.

Compensation techniques focus on the implementation of techniques which are meant to improve the safety and efficiency of a person’s swallow. These include changes to posture during feeding, positioning food differently in the mouth and diet and fluid modifications (eg, thickening fluids to make them easier to swallow). It may also include the use of alternative feeding such as a feeding tube to meet nutritional needs.

Rehabilitation techniques focus on improving the physiology that is impaired in the swallow. Most of these techniques involve a form of exercise which ‘trains’ the muscles to improve swallowing function and minimise or prevent dysphagia-related conditions.

Getting treatment for dysphagia is important to prevent not only nutritional deficiencies but also stave off related conditions such as pneumonia (caused when food particles enter the lungs and cause infection), Ms Kelly emphasised. Early intervention to improve swallowing also goes beyond just functional benefits – it improves patients’ enjoyment of food and life.

Dysphagia can diminish the joy of eating because of the fear of choking and the blandness of ‘mushy’ texture-modified food. To increase the appeal and nutritional quality of meals, serve a variety of brightly coloured foods that have been pureed, mashed, minced or thickened.

