

## Swallowing Disorders

Most of us take for granted something as routine as swallowing. But when a catastrophic illness or injury - such as brain injury - occurs, swallowing may no longer be an automatic process.

Normal swallowing involves a complex sequence of movements, regulated by the brain, requiring very precise muscle control. When swallowing is working in sync, these movements occur quickly, needing only two or three seconds for food or liquid to pass from the back of the mouth to the stomach. If the process is out of sync, however, a person may experience difficulty in swallowing, known as dysphagia.

How do you know if a patient is having a swallowing problem?

- Excessive mouth movement during chewing and swallowing?
- Have difficulty starting to swallow?
- Cough or choke while eating or drinking?
- Need to swallow two or three times?
- Food remains on the tongue after swallowing?
- Pocket food on one side of the mouth?
- Excessive drooling, especially immediately after eating?
- Large amount of extra secretions?
- Have a gargling sounding voice after eating or drinking?
- Have body temperature increases for unknown cause?
- Have chronic respiratory distress?

There are ways, with assistance from a speech-language pathologist, to improve swallowing:

1. Do prescribed exercises to improve the range of motion of the tongue and strengthen the airway passage for better closure.
2. Do thermal stimulation, such as placing a cold instrument at the back of the mouth.
3. Change the consistency of food and liquids.
4. Change the seating position to allow food to go down more easily.
5. Regulate the amount of food and liquid taken per swallow.
6. Slow down the time between swallows.
7. Use sensory cues, such as verbal, gesture, or physical assistance.
8. Structure the environment so that it is free of distractions.

Severe dysphagia may require seeing a radiologist for a videofluoroscopic study. It shows where the swallowing difficulty is occurring, how changes in positioning and consistency of food affect swallowing and if aspiration is taking place. Based on the results of a videofluoroscopic study, specific swallowing guidelines and treatments can be developed.

What the patient and their family can do:

- Become familiar with the individualized swallowing program and follow the guidelines carefully.
- Sit in an upright position when eating unless other specific recommendations have been made.
- Take foods and liquids in the consistency recommended by the speech- language pathologist.
- Take small amounts of food.
- Allow sufficient time for eating.
- Be sure food has swallowed completely before taking more.
- Stop eating immediately if choking begins.
- Remain seated for 20 to 30 minutes after eating.

Source: "Swallowing Disorders: What Families Should Know", by Tom Rader, MS, CCC-SLP and Barbara Rende, MD, CCC-SLP, Therapy Skill Builders., Tucson, AZ.