

NHS

Liverpool University Hospitals NHS Foundation Trust

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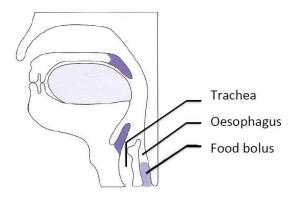
What is Dysphagia?

Patient Information Leaflet

What is dysphagia?

Dysphagia is the medical term for a difficulty swallowing.

Normally when you swallow, food/drink will go down your oesophagus/ gullet to your stomach.



If you have a difficulty swallowing then food/ drink may go into your trachea/ airway and down to your lungs.

Why does dysphagia occur?

You may have a difficulty swallowing as a result of:

- Head/ brain injury
- Brain or spinal surgery
- Neurological disorders (e.g. MND, MS)
- Stroke
- Head & Neck surgery

What are the signs of dysphagia?

If you have difficulty swallowing you may experience one or more of the following:

Drooling from the mouth.

- Food or fluid leaking out of your nose.
- Food left in your mouth after swallowing.
- Lots of swallows for one mouthful.
- Throat clearing, coughing or choking when eating/drinking.
- A wet or gurgle-like voice after swallowing.
- Excessive or thick saliva/ secretions in your mouth or throat.

Possible risks associated with dysphagia:

- Choking episodes when eating/drinking.
- Frequent chest infections.
- Dehydration
- Weight loss as a result of avoiding food, or lengthy mealtimes.
- Feeling isolated at mealtimes.

How is swallowing assessed?

If you have a difficulty swallowing you will be assessed by a Speech & Language Therapist.

They will assess **all** the stages of swallowing, including how easy it is to control food when it is in your mouth (e.g. for chewing).

They will also assess whether food or drink is "going down the wrong way" (entering the trachea rather than the oesophagus) and give advice about management and treatment.

How is dysphagia managed?

There are a number of different ways to make swallowing safer:

Diet/ fluid modification

The consistency of your food or drink may be changed (e.g. by using thickening powder in drinks; by blending food).

Head postures

You may be advised to keep your head in a specific position when swallowing (e.g. chin tuck; head tilt).

Swallowing techniques

You may be advised to use a specialist strategy every time you swallow (e.g. breath-hold; effortful swallow).

Swallow therapy

You may be given exercises to complete to help your swallow to recover (e.g. Masako; Mendelsohn).

You will be given specific information about what helps you.

Sometimes Speech & Language Therapists recommend that no food, drink or medications be taken by mouth (Nil By Mouth).

This is because there is a high risk of food or drink going into the trachea/ lungs and possibly causing choking or a chest infection.

What should I eat and drink?

Your Speech & Language Therapists will recommend a treatment plan.

In order to ensure that swallowing is safe please always follow the Speech & Language Therapy advice, even when bringing in food from home.

You will be provided with information leaflets with details of your treatment plan. There will also be a yellow information sign behind your bed.

What can I do to help?

- Allow extra time for eating/ drinking.
- Take small mouthfuls.
- Make sure you are sitting fully upright.
- Don't lean over to one side.
- Do not eat and drink when you are tired.
- Do not tilt your head backwards.
- Avoid talking with your mouth full.
- Make sure your mouth is clean after eating.
- Small, frequent meals may be easier to manage.

Other sources of information:

www.nhs.uk www.rcslt.org www.dysphagia.org.uk

Please contact the Speech & Language Therapy department if you require further information about these organisations, or if you have any questions or concerns.







If you require a special edition of this leaflet

This leaflet is available in large print, Braille, on audio tape or disk and in other languages on request. Please contact:

Tel No: 0151 529 2906

Email: interpretationandtranslation @aintree.nhs.uk

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