Feeding and Swallowing Problems (Dysphagia)

Speech and Language Therapy Department
Community & Therapy Services

This leaflet has been designed to give you important information about your condition / procedure, and to answer some common queries that you may have.
Speech and Language Therapists are specialists in the assessment and treatment of feeding and swallowing problems. If there is a possibility that you have a swallowing problem, you will be referred for a swallowing assessment.

When a Speech and Language Therapist (SLT) has assessed your swallowing, they may find that you are unsafe to swallow. This is because when you eat and drink, food and fluid goes into your lungs instead of into your stomach. This is called aspiration. If you continue to eat and drink when you are aspirating, you may become ill with a chest infection or pneumonia.

The team looking after you will talk to you about how best to help you if this is the case. It is important to make sure that you are properly nourished and hydrated. This will help your recovery.

Normal feeding and swallowing
Normal feeding and swallowing is a complex process using many nerves and muscles. These can be damaged causing feeding/swallowing problems. Normally we don’t think about swallowing, it just happens. So how does it all work?

- Food or drink is placed in the mouth
- It is chewed to make a ball
- It is then moved to the back of the mouth using lips, tongue and jaw
- The throat muscles squeeze the food onwards and downwards as the swallow is triggered
- The voice box rises to shut off the airway and lungs. This makes sure the food and drink goes down the right way
- The tube behind the voice box opens to allow the food and drink down to the stomach
- The swallow process takes less than a second

What can go wrong?

Problems in the mouth
The muscles in the mouth may be weak, for instance, the lips, tongue, jaw or palate. This can lead to food/fluid being difficult to control in ways such as:

- Problems biting food off
- Problems chewing lumps of food
- Difficulty forming a ball of food
- Difficulty getting food to the back of the mouth
- Bits of food getting left in the mouth
- Food spilling out of the mouth

Delayed swallow
The swallow may not work quickly enough to make sure all of your food/drink goes down the right way. This is caused by the muscles not working properly. This can lead to aspiration.

Weak swallow
The muscles are not strong enough to lift the voice box high enough to close off the airway. This means the food/drink can spill over into the voice box and possibly the lungs. Weak muscles can also make it difficult to push food downwards and it may get stuck in the throat. Sometimes you can feel this but not always.
Here are some of the things that may have been recommended to help you:

1. Trials of oral feeding
   The SLT may recommend that you trial small, controlled amounts of food or fluid only. This may be necessary in order to establish whether you are safe to go back to normal quantities of food and fluid through your mouth. Staff will monitor you closely during your trials to see how well you manage.

2. Altered textures of food and drink
   The SLT may recommend changes to the consistency of your food and fluids to help you to swallow more safely. We may recommend that you have soft foods or blended foods to reduce the risks of aspiration and choking. Sometimes, fluids may go down more safely if they are of a thicker consistency. If this is the case, the SLT will advise that a thickening powder is added to your drinks to change the consistency.

3. Review assessments
   The SLT team will visit you on the ward to monitor your progress. If your swallowing improves, the consistency of your food and drink will be adapted to suit this. Should you find swallowing becomes more difficult, the SLT will be able to advise on how swallowing can be made safer for you.

4. Further investigations
   Sometimes the team looking after you will need to have more information about your swallowing in order to give you the best advice.

You may be referred for other investigations, including a moving x-ray of your swallowing, called a videofluoroscopy, or a tiny camera down into your throat to see inside it. The investigations will be fully explained to you if it is felt they are necessary.

5. Recommendation of Nil By Mouth
   Sometimes the SLT will see that the risks of you eating and drinking via your mouth are so great that you should not do this at all. The SLT would then recommend that you are placed Nil By Mouth. An alternative way of feeding you via a tube will be discussed, in conjunction with the team looking after your care.
   This may need to be for a short time to allow you time to get better, or the decision may need to be taken for this to be a long term solution. Whichever is the case for you, the decisions will be discussed fully with you and your family to ensure the plan is right for you. The team will also review your progress and ensure you have enough information to help make a decision.

6. Assessment by a Dietitian
   You will be referred to the Dietitian for assessment and advice if you are not managing to eat or drink enough.

7. Feeding and Swallowing Recommendations Plan
   A purple ‘Feeding and Swallowing Recommendations Plan’ will be put on the wall above your bed. This will contain special instructions to tell you, your family and staff what is safe for you to eat and drink. This plan will be replaced if there is any change to your needs. Should you move wards, the...

For more information about our Trust and the services we provide please visit our website: www.nlg.nhs.uk
plan will move with you. When you go home, you will take it with you.

**Contact details for Further Information**

If you need any further information, please contact the Speech and Language Therapy Department:

Grimsby: 01472 875405
Scunthorpe and Goole: 01724 298100

**Reference section**


**Concerns and Queries**

If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

For Diana, Princess of Wales Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01472) 875403 or at the PALS office which is situated near the main entrance.

For Scunthorpe General Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which situated on C Floor.

Alternatively you can email: nlg-tr.PALS@nhs.net

**Confidentiality**

Information on NHS patients is collected in a variety of ways and for a variety of reasons (e.g. providing care and treatment, managing and planning the NHS, training and educating staff, research etc.).

Everyone working for the NHS has a legal duty to keep information about you confidential. Information will only ever be shared with people who have a genuine need for it (e.g. your GP or other professionals from whom you have been receiving care) or if the law requires it, for example, to notify a birth.

Please be assured however that anyone who receives information from us is also under a legal duty to keep it confidential.

**Zero Tolerance - Violent, Threatening and Abusive Behaviour**

The Trust and its staff are committed to providing high quality care to patients within the department. However, we wish to advise all patients / visitors that the following inappropriate behaviour will not be tolerated:

- Swearing
- Threatening / abusive behaviour
- Verbal / physical abuse

The Trust reserves the right to withdraw from treating patients whom are threatening / abusive / violent and ensuring the removal of those persons from the premises.

All acts of criminal violence and aggression will be notified to the Police immediately.

**Risk Management Strategy**

The Trust welcomes comments and suggestions from patients and visitors that could help to reduce risk.

Perhaps you have experienced something whilst in hospital, whilst attending as an outpatient or as a visitor and you felt at risk.

Please tell a member of staff on the ward or in the department you are attending / visiting.
Moving & Handling

The Trust operates a Minimal Lifting Policy, which in essence means patients are only ever lifted by nursing staff in an emergency situation.

Patients are always encouraged to help themselves as much as possible when mobilising, and if unable to do so, equipment may be used to assist in their safe transfer.

If you have any questions regarding moving and handling of patients within the Trust, please speak to a member of staff in the ward or department you are visiting.

Northern Lincolnshire and Goole NHS Foundation Trust

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