



PATIENT INFORMATION

RESPIRATORY DYSPHAGIA



INTRODUCTION

This booklet has been produced to provide you and your family general information about some of the difficulties you may have whilst eating and drinking due to your respiratory condition.

It is designed to give you practical guidance to help you follow the advice you have been given by the Speech & Language Therapist (SLT).

WHAT IS DYSPHAGIA?

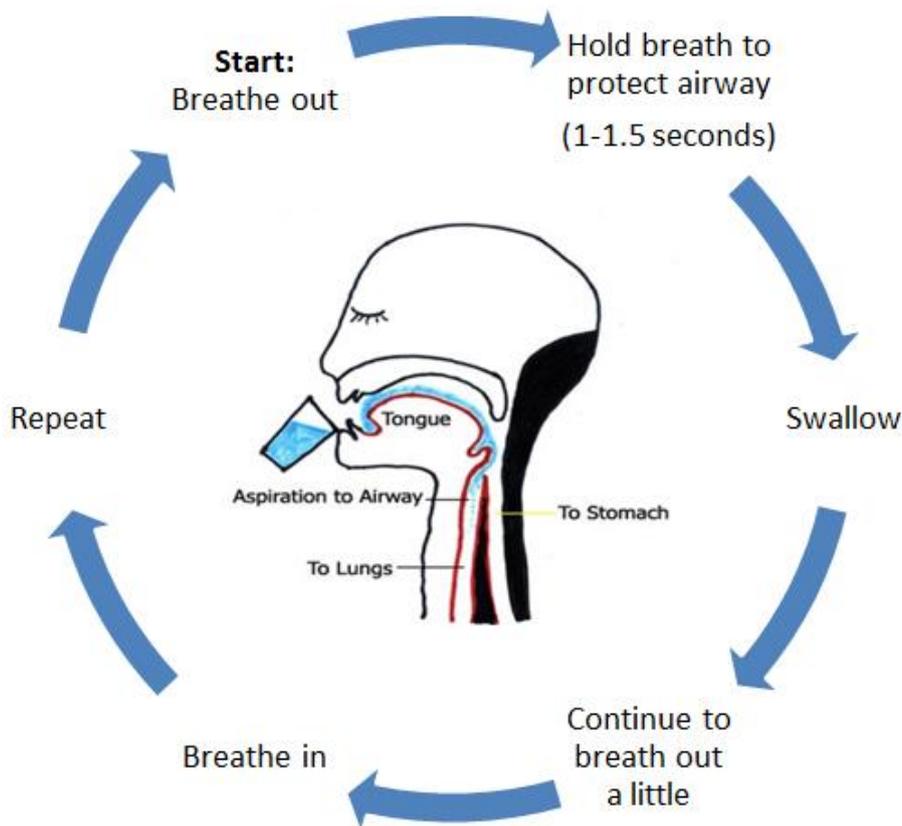
- Dysphagia means 'a swallowing difficulty'
- The term is used to describe an inability to eat and/or drink.
- The muscles involved in swallowing and breathing have dual roles; problems with one can cause difficulty with the other.
- Risks associated with dysphagia include aspiration (food going down the wrong way into your lungs), choking, poor nutrition and hydration and reduced quality of life.

HOW IS SWALLOWING LINKED TO BREATHING?

Swallowing is a very complex mechanism involving the coordination of more than 6 nerves and 26 muscles. We swallow around 600 times per day (including saliva); normally, this happens quickly and only takes a few seconds to complete.

The body coordinates swallowing with the breathing cycle. When we swallow we temporarily stop breathing in order to close our airway, this stops food and/or drinks from entering the lungs.

The usual cycle:



SIGNS YOU MAY HAVE RESPIRATORY DYSPHAGIA

- Reduced appetite.
- Difficulty chewing and avoiding certain textures e.g. crumbly biscuits or stringy vegetables.
- Becoming increasingly short of breath whilst chewing.
- Taking longer to complete a meal.
- Wet/gurgly voice during and/or after swallowing.
- Increased shortness of breath after swallowing.
- Sensation of food sticking in the throat.
- Coughing during or just after eating and drinking.
- Feeling 'full' despite only having a small amount.
- Getting tired after eating and drinking.
- Experiencing more acid reflux (indigestion).
- Difficulty taking tablets.
- Chestiness or recurrent chest infections.

HOW DOES THIS AFFECT YOU?

If you require oxygen and wear an oxygen mask this can make eating and drinking more difficult, you may need someone to help you (see overleaf – page 3).

A dry mouth is common if you are using an oxygen mask or you mouth breathe. This can make chewing and clearing food from your mouth more difficult.

Increased rate of breathing during eating and drinking can cause food to go down the wrong way and could lead to chest infections.

Increased rate of breathing can also mean your body is using up more energy and you may find your muscles tire and weaken.

As you tire quickly this may impact how much you are able to eat and drink which means you may miss out on important nutrients and/or lose weight.

If you need assistance with improving your diet with supplements please contact your GP who can refer you to a Dietitian if required.

ADVICE ON HOW YOU CAN HELP:

1. BEFORE EATING OR DRINKING

- If you require oxygen it is preferable to have via a nasal cannula whilst eating and drinking. However, if using a face mask, you may require someone to assist you, for example, to feed you or lift the mask on and off during eating/drinking.
- Try to have a relaxing and comfortable environment during mealtimes. Reduce distractions e.g. music or TV and avoid talking whilst eating and drinking.
- Try to relax your whole body as much as possible.
- Ensure you are well rested before eating and drinking as you may find food preparation tiring.

2. MOUTH CARE

- Your mouth should be clean and moist. If you usually have a dry mouth, discuss this with your Doctor and/or Speech & Language Therapist.
- If you have dentures, they should be worn while eating (provided they fit well). You may wish to consider dental fixative. Dentures should be clean.

3. POSITIONING

- Preferably sit out in a chair to eat or drink.
- If in bed, sit so you are not leaning to the side or slumped over. Use pillows, if needed, to support you and maintain a straight upright position.
- Your head and chin should be in a central position, not tipped sideways, backwards or forwards. Unless otherwise specified by your Speech & Language Therapist.

4. PACING

- It may be difficult for you to coordinate between breathing and swallowing, take the time you need, do not rush.
- Swallow each mouthful before taking the next. Don't overfill your mouth. You may find it easier to have 'softer foods' which require less chewing, e.g. minced meat rather than steak.
- Avoid continuous drinking - take a single sip at a time.
- You may benefit from having an extra swallow to clear any residue.
- Have little and often throughout the day, choosing high calorie foods if you are struggling to eat a full meal.

5. UTENSILS

- Use normal cups and beakers unless otherwise recommended. Your Speech & Language Therapist may advise you whether it is appropriate to use straws, spouted cups or adapted drinks containers.
- You may benefit from equipment that makes eating and drinking easier (e.g. plate guards, adapted cups and cutlery, non-slip mats). This equipment can be bought online, or you may wish to consult an Occupational Therapist about what equipment might help.

6. CHANGING FOOD AND DRINK CONSISTENCY

- Modified textures (also called modified consistencies) may help you to swallow more easily and safely. A Speech & Language Therapist will assess your swallow and let you know the most beneficial or 'safest' consistencies of food and drink for you.
- This reduces the likelihood of food going the 'wrong way' and entering the lungs (aspiration), rather than the stomach. This can result in coughing, choking and/or chest infections.

Where to find more information about creating modified texture diets:

- Altered food and drink consistencies are given labels called 'Levels' with a number and descriptor (e.g. Level 1 slightly thick, Level 4 pureed) to help you know exactly what type of food and drink is safest. This labelling system is called IDDSI (International Dysphagia Diet Standardisation Initiative).
- You may have been given an additional Dysphagia Passport or diet level booklet which provides more information on IDDSI that is tailored to your swallowing recommendations.
- The IDDSI website also has more information about how to check food is the right consistency, including information for people who are preparing the food. You can find out more at this website link: <https://iddsi.org/>

7. AFTER EATING

- Remain sat upright for at least 30 minutes after a meal.

8. OTHER

- You may find it beneficial to have tablets in an alternative non-solid format such as liquid or crushed, please liaise with your GP or Pharmacy for further advice.

USEFUL CONTACT:

Speech & Language Therapy

Covering the Alexandra Hospital, Redditch and Worcestershire Royal Hospital, Worcester.

Telephone: 01905 760 475

Email: wah-tr.SpeechLanguageTherapy@nhs.net

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PET@nhs.net

Opening times:

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.