

Swallowing Disorders (Dysphagia) in Adults

What are Swallowing Disorders?

Swallowing disorders, also called dysphagia (dis-FAY-juh), can occur at different stages in the swallowing process.

- **Oral Phase (preparatory & initiation)**- sucking, chewing and moving food or liquid into the throat
- **Pharyngeal phase**-starting with the swallowing reflex, squeezing food down the throat, and closing off the airway to prevent food or liquid from entering the airway (aspiration) or to prevent choking
- **Esophageal phase**- relaxing and tightening the openings at the top and bottom of the feeding tube in the throat (esophagus) and squeezing food through the esophagus into the stomach

Swallowing Revealed

Oral Preparatory Phase

- Eating is anticipated
- Food is brought to the mouth
 - Bitten off
 - Taken from utensil
- Food is mixed with saliva and chewed when needed
- Liquids are sucked or sipped through a cup or straw
- Involuntary coordination of sucking, swallowing and breathing

Oral Initiation Phase

- The food or liquid is collected
- Sealed between the roof of the mouth and the tongue
- The swallow allows the liquid to fall from mouth into pharynx
- Food is swallowed as the tongue moves toward the back of the throat (pharynx) with a stripping wave
- This begins the actual reflexive swallow

Pharyngeal Phase

- Soft palate elevates to keep food from nose
- Tongue moves back
- Larynx moves up
- Epiglottis tilts down to guide the food past the airway
- Breathing stops
- Vocal folds come together
- Muscles of pharynx contract
- Upper esophageal sphincter relaxes

Esophageal Phase

- Peristalsis (a wave of contraction) moved the food through the esophagus
- The lower esophageal sphincter relaxes to allow the food to pass into the stomach
- The lower esophageal sphincter then returns to a closed 'tonic' state to prevent regurgitation

Common Causes of Swallowing Disorders

Several diseases, conditions or surgical interventions can result in swallowing problems.

- CVA/Stroke
- Cancer: lung cancer, esophageal cancer throat and mouth cancer
- History of pneumonia (especially right lower lobe)
- COPD
- Any degenerative disease (Parkinson's, Huntington's, Dementia, Alzheimer's, Muscular Sclerosis, ALS)
- Congestive Heart Failure
- Head Trauma

Signs & Symptoms of Swallowing Disorders

- Coughing during or right after eating or drinking
- Wet or gurgly sounding voice during or after eating or drinking
- Extra effort or time needed to chew or swallow
- Food or liquid leaking from the mouth or getting stuck in mouth
- Recurring pneumonia or chest congestion after eating
- Weight loss or dehydration from not being able to eat enough

The Result of Swallowing Disorders...

Poor nutrition or dehydration

Risk of aspiration (food or liquid entering the airway), which can lead to pneumonia

Are They Aspirating?

- Eyes watering
- Changes in respiration rate
- Change in lung sounds
- Facial grimacing
- Gagging
- Chest pain
- Weight loss
- Dehydration
- Pneumonia or history of pneumonia
- Reddening of the face
- Difficulty breathing
- Audible breathing
- Coughing
- Gurgly voice quality
- High or low back pain
- Spiked fever
- Chronic copious clear secretions

How Are Swallowing Disorders Diagnosed?

A speech-language pathologist (SLP) who specializes in swallowing disorders can evaluate individuals who are experiencing problems eating and drinking. The SLP will:

- Take a careful history of medical conditions and symptoms
- Look at the length of movement of the muscles involved in swallowing
- Observe feeding to see posture, behavior, and oral movements during eating and drinking
- Possibly perform special tests to evaluate swallowing, such as:

- **Modified Barium Swallow**-individual eats or drinks food or liquid with barium in it and then the swallowing process is viewed on an X-ray
- **Endoscopic Assessment**- a lighted scope is inserted through the nose and then the swallow can be viewed on a screen.

How Can a Speech Language Pathologist Help?

Treatment depends on the cause, symptoms and type of swallowing problem. A speech language pathologist may recommend:

- Specific swallowing treatment (e.g., exercises to improve muscle movement)
- Evidence-based clinical tests and treatment strategies to improve function
- Positions or strategies to help the individual swallow more effectively
- Modifications to diet and specific food and liquid textures that are easier and safer to swallow