

Introduction to **Swallowing Difficulties**

Speech and Language Therapy Swallowing Advice

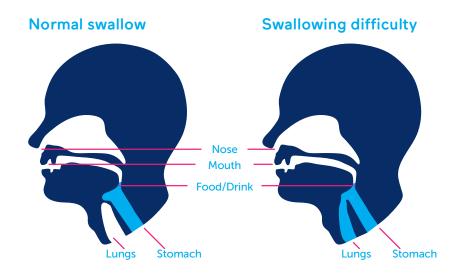


What is a swallowing problem?

You have been referred to our service because it is felt you may have some problems with your swallowing.

A wide range of conditions can cause swallowing problems. These include; Neurological conditions such as a stroke, dementia or Parkinson's disease, conditions such as cancer and Chronic Obstructive Pulmonary Disease, problems due to head and neck surgery or reflux.

Swallowing is a complex process involving the muscles of the mouth, throat and the oesophagus (food pipe). When you swallow, food or drink is moved through the mouth and throat into the oesophagus by a series of muscle movements. This ensures it does not go the wrong way and end up in the trachea (windpipe) which leads to the lungs. This could lead to problems such as chest infections, pneumonia or choking.



Why have I been referred to a Speech and Language Therapist?

Speech and Language Therapists are trained to assess people with swallowing difficulties. When we see you we will ask you about your medical history - including any medications you are taking, and about the nature of your swallowing difficulties. It is useful if you can tell us what type of swallowing problems you have been having. If there are certain foods or drinks that are more difficult than others or if you are worse at certain times of the day. We will look at the how the muscles in your face, mouth and throat are working and will also want to see you eat and drink something so we can see you swallowing. Your Speech and Language Therapist will have prioritised your referral depending on how severe your swallowing problem is.

When will I be seen?

Things may change whilst you are waiting to be seen.

Please contact the department if any of the following should occur whilst you are waiting to be seen as you may need to be seen sooner:

- A significant increase in coughing episodes when eating or drinking
- Choking episodes which require intervention (e.g. back slaps or Heimlich manoeuvre)
- You are diagnosed with a chest infection
- The amount you are able to eat or drink significantly reduces.

What can I do to help my Swallowing?

If you have been seen by a Speech and Language Therapist whilst in hospital, please follow their advice.

- When eating and drinking, always sit as upright as possible in a well supported position
- Eat slowly, one mouthful at a time. Make sure that each mouthful is swallowed before taking the next one
- With drinks, take small sips
- Sit up for at least 30 minutes after eating and drinking
- Keep head forward, with chin slightly down to swallow
- X Avoid mixing drinks and food in the same mouthful
- Do not throw your head back
- Avoid talking whilst eating and drinking
- Straws and spouted beakers can make drinking harder for some people. Take care if using these and follow the advice of your speech and language therapist





Oral hygiene

Maintaining good oral hygiene is essential to reduce your risk of chest infections. Ensure that the mouth is clear of all food after meals. This will help reduce the presence of bacteria in the mouth which may be transferred to the lungs.

- Brush your teeth twice a day with a pea sized amount of toothpaste.
- If you wear dentures, they should be cleaned regularly with warm soapy water.
- You should visit your dentist every two years.



Medication

If you have problems swallowing medication, please speak to your GP or pharmacist about alternatives. Some people find it easier to take medication with a spoonful of something thicker such as porridge or jam rather than with liquids but always check with a pharmacist before trying this - as this may not be appropriate for the tablets you are taking.



Weight

If you are concerned about unintentional weight loss.

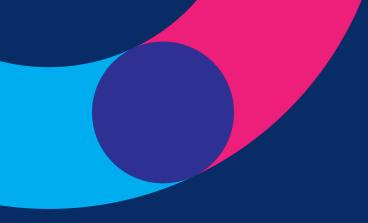
Please speak to your GP about being referred to a dietitian.

High Risk Foods

Some foods are harder to swallow safely. You might find it helpful to avoid some of these if you find them difficult.

- Mixed thin/thick textures such as soup with bits or lumps, cereals which do not blend with milk like cornflakes and muesli, minced meat and thin gravy
- Hard or dry foods such as nuts, boiled sweets, raw vegetables, crusty rolls, bread and pastry crusts, bone or gristle
- Fibrous or tough foods such as tough meat, pineapple, celery
- Chewy foods such as chewy sweets, chunks of cheese, dried fruits
- Crispy foods such as wafers, crisps, crispy bacon, batter
- Crunchy foods such as raw apples, radishes and toast
- Crumbly foods such as biscuits, crackers, crumble, pastry
- Pips, seeds, hard grains, husks and pith such as pumpkin seeds, quinoa, brown rice, raspberries orange pith, bran
- Food with skins or shells such as grapes, peas, fresh tomatoes, sweetcorn, skinned sausages
- Skin such as crackling, chicken or fish skin, skin of baked potato
- Sticky or gummy foods such as peanut butter, thick mousse, jelly
- Stringy foods such as runner beans, rhubarb
- Hard pieces or crusts formed in cooking/heating such as crusty top of lasagne, skin of rice pudding
- Floppy foods such as lettuce, baby spinach, cucumber
- Juicy foods where liquid separates out such as melon





For further help or information

Speech and Language Therapy Highlands Health Centre, Lothian Way, HU7 5DD, Hull

01482 335165 chcp.slt@nhs.net

Let us know what you think...

We value your feedback and use it to improve our services. There are a number of ways you can provide feedback about any element of the Speech and Language Therapy Service.

You can contact a CHCP Customer Care Advisor if you have a comment, concern, compliment or complaint by writing to:

Customer Care Advisor
City Health Care Partnership CIC
5 Beacon Way
HULL
HU3 4AE

chcp.customercare@nhs.net

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