



Speech and Language Therapy

Feeding at Risk

Many people experience difficulties with swallowing. This is known as Dysphagia. Dysphagia can occur as a result of physical changes after surgery or certain medical conditions, e.g. stroke, progressive neurological diseases or dementia, causing muscle weakness or difficulties coordinating the muscles used for eating and drinking. Aspiration (food or drink 'going down the wrong way') or choking can occur when swallowing difficulties lead to food, fluid or saliva entering the airway. This can result in a condition called aspiration pneumonia.

What is "feeding at risk"?

If swallowing difficulties are severe, tube feeding may be required. However this may not be appropriate for some patients, despite on-going unsafe swallowing. This may include certain medical conditions or end of life care where tube feeding will not enhance length or quality of life. Occasionally patients may decline tube feeding or may not wish to follow the recommendations for the safest food or drink consistencies given by a Speech and Language Therapist.

In these circumstances, patients with dysphagia continue to eat and drink with acknowledged risk of aspiration. This is known as 'feeding at risk'.

Decision making

The Speech and Language Therapist will complete an assessment of swallowing, explaining the results and possible management options. Your Speech and Language Therapist can give recommendations to reduce aspiration risks by

modifying your food or fluids e.g. careful choice of food textures or thickness of drinks, or providing strategies and techniques to ease swallowing. Recommendations and the management plan will be discussed with the multi-disciplinary team (MDT) or GP as appropriate.

If you are unable to make this decision independently a best interest decision will be made by the MDT/GP in discussion with your family and carers, taking into account any prior wishes you have expressed, such as advanced directives.

If you are “feeding at risk” you may experience the following:

- recurrent chest infections
- coughing or choking during or after eating/drinking
- build-up of residue of food or fluids in your mouth
- a wet or ‘gurgly’ voice after eating/drinking
- increased congestion or shortness of breath when eating/drinking
- weight loss and dehydration
- difficulties managing your saliva

If you experience any of the above you may wish to stop eating or drinking and try again later. If signs of aspiration become acutely distressing, please discuss this with the doctor. If your health deteriorates further, it may be necessary to discuss future plans with your GP.

Strategies to optimise safe swallowing include:

- do not eat or drink if you are not fully alert
- sit as upright as possible when eating/drinking
- take your time to clear your mouth and take small mouthfuls of food and drink
- avoid straws/spouted cups unless otherwise instructed
- eat and drink slowly, with hand over hand feeding if appropriate

Oral Care

It is important to keep your mouth clean by regularly brushing teeth/dentures to remove residue and reduce bacteria build-up in your mouth that may lead to mouth or chest infections (speak to your dentist for further advice).

Further information

Your doctor can discuss any questions you may have. Speech and Language Therapists can give advice about managing swallowing difficulties and feeding at risk. The medical team should discuss a plan for future management of chest infections once a decision has been made.

The decision to feed at risk can be reviewed at any time. The priority is your wellbeing.

Your Speech and Language Therapist is:

S/he can be contacted on:

If you need the information in another language or format please ask us

Nëse ky informacion ju nevojitet në një gjuhë apo format tjetër, ju lutem na kontaktoni

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