

Dysphagia Rehabilitation for Tracheostomised Stroke Patients: What are We Doing?

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Abstract

It is well documented that over 50% of patients with a tracheostomy tube will have an oropharyngeal dysphagia which places them at risk of aspiration (NCEPOD, 2014; Leder 2002; Warnecke 2013). As part of SLT practice, dysphagia exercises are used as a means to rehabilitate a patient's swallowing to support their return to oral intake. Database reviews highlight an expanse of research on tracheostomy management or dysphagia rehabilitation but little is currently known about how these two areas interact. Diezwas and colleagues in 2018 presented preliminary findings using pharyngeal electrical stimulation, this is not widely available in the U.K. The aim of this project for tracheostomized stroke patients:

- Complete a multidisciplinary audit
- Reflect upon local practice in dysphagia rehabilitation

A standardized audit was completed by a multidisciplinary team on all stroke patients that had a tracheostomy in 2018 (NCEPOD, 2014). Patients that received SLT input were reviewed by a panel of SLTs competent in tracheostomy. They identified: commencement, appropriacy and intensity of dysphagia intervention. In 2018, twelve patients on the stroke pathway had a tracheostomy. All patients had early SLT input. Preliminary panel discussions identify that dysphagia rehabilitation for tracheostomy patients is inconsistent and limited. This project positively highlights timely SLT input for tracheostomized patients on the stroke pathway. Dysphagia rehabilitation is limited but this is multifactorial. There is a need for further research into best practice for this patient cohort.

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