

### What is Dysphagia? Difficulty Swallowing

**Dysphagia** is a condition that can be defined as difficulties and discomfort involving the mechanics of swallowing. Individuals with dysphagia can have swallowing difficulties while eating, drinking, and/or taking medications. The specific mechanical difficulty each individual experiences varies and can range from severe to mild. Research studies reveal that most individuals with IDD experience some degree of dysphagia during their lifetime (Barks and Sheppard, 2005; Riquelme, Benjamin, Tahhan, Sandoval, Alomari, and Soyfer, 2016; Sheppard, Hochman, and Baer, 2014).

#### Risk Factors

- Taking medication that has a sedating effect.
- Taking medication that causes a dry mouth.
- Poor muscle tone (hypotonic).
- Certain neurological conditions: Parkinson's, Multiple Sclerosis, seizure disorders, dementia, cerebral palsy.
- Age.
- Gastroesophageal reflux disease (GERD).
- Poor Oral hygiene, poor oral health, loss of teeth or no teeth.
- Stroke.

#### Diagnostic Tests

- X-ray with a barium contrast to view changes in the esophagus while swallowing.
- A dynamic swallow study, which is swallowing barium coated foods of different consistencies to detect aspiration.
- Endoscopy to view the esophagus through a flexible lighted tube.
- Fiber-optic endoscopic evaluation to examine swallowing with a camera and endoscope.
- Manometry is a small tube that measures muscle contractions of the esophagus (Mayo Clinic, 2019).

#### App of the Month



Designed for people with dysphagia. SmallTalk Dysphagia provides a vocabulary of pictures and icons that talk in a natural human voice. SmallTalk Dysphagia contains 50 phrases that cover eating equipment, meal assistance, diet, liquids, medications, and compensatory treatment techniques. It also contains four demonstration videos of treatment techniques commonly used for swallowing. This app lets you take along the words and phrases you need to communicate your swallowing needs. (App of the Month is not endorsed by DBHDS OIH. User

#### Symptoms of Dysphagia

- Drooling or coughing on large amounts of saliva.
- Difficulty with the mechanics of eating.
- Dribbling or spillage of food or drink from the mouth while eating.
- Refusal or anxiety associated with mealtime or taking medications.
- Taking an extra-long time eating or drinking at mealtime.
- Respiratory distress associated with eating or drinking.
- Gagging, coughing, or choking associated with eating or drinking.
- History of upper respiratory infections and/or aspiration pneumonia.
- Aggressive behaviors during activities involving swallowing.
- Lack of any coughing, an absence voluntary cough or swallowing reflects.
- Changes in voice quality associated with eating.
- Sudden change in eating behavior and appetite.
- Gradual or sudden weight loss, chronically low body weight, or failure to thrive.
- Chronic dehydration.
- Delayed initiation of swallowing and/or fear of swallow or choking.
- More than two swallows for each bite-sized mouthful.
- Vomiting up partly digested food, liquids, or medications into the mouth or nose.
- Coughing or sneezing following oral intake.
- Loss of interest in certain foods or textures (Barks and Sheppard, 2005).

#### Stroke and Dysphagia

A stroke can impair the region of the brain that controls the muscles used to swallow (American Stroke Association (ASA), 2018). Dysphagia following a stroke can lead to poor nutrition, dehydration and pneumonia. Silent aspiration is also a threat to people who have suffered a stroke (Ramsey et al., 2005). Silent aspiration occurs without signs or symptoms, because there is no coughing reflex due to stroke damage (Ramsey et al., 2005). An estimated 28-38% of people (who have had a stroke), have silent aspiration 2-3 months after a stroke (Ramsey et al., 2005). Individuals who have suffered a stroke should always be evaluated for swallowing difficulties post-stroke.

References:  
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Barks, L. S. and Sheppard, J.J. (2005). Chapter 17: Eating and swallowing disorders (dysphagia in adults and children). In A. Nehring, W. M. Core curriculum for specializing in intellectual and developmental disability: A resource for nurses and other health care professionals. (pp. 272 – 290). Jones and Bartlett Publishers, Sudbury, MA.  
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### **Coronavirus/COVID-19**

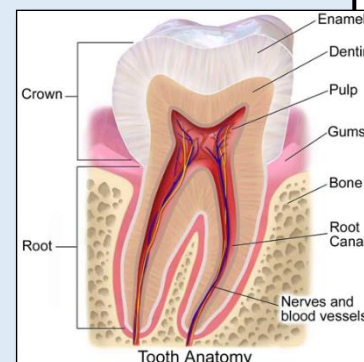
The COVID-19 pandemic is a rapidly evolving situation. The following links will help you stay up-to-date with the latest information. To submit COVID-19 questions (for response in an upcoming DBHDS FAQ), please email [stephanie.waite@dbhds.virginia.gov](mailto:stephanie.waite@dbhds.virginia.gov).

#### **Latest Resources for CSB's & Other Licensed Providers:**

- DBHDS – Frequently Asked Questions [04/15/2020] <http://www.dbhds.virginia.gov/assets/doc/EI/dbhds-covid-19-4.14.20.pdf>
- Behavioral Health Implications [http://www.dbhds.virginia.gov/assets/doc/EI/behavioral-health-implications\\_covid-19\\_early.pdf](http://www.dbhds.virginia.gov/assets/doc/EI/behavioral-health-implications_covid-19_early.pdf)
- Guidance for ACT Programs [http://www.dbhds.virginia.gov/assets/doc/EI/covid-act-recs\\_3\\_13.pdf](http://www.dbhds.virginia.gov/assets/doc/EI/covid-act-recs_3_13.pdf)
- Department of Behavioral Health & Developmental Services, COVID-19 website <http://www.dbhds.virginia.gov/covid19>
- Centers for Disease Control (CDC) <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- World Health Organization (WHO) <https://www.who.int/health-topics/coronavirus>
- National Institutes of Health (NIH) <https://www.nih.gov/health-information/coronavirus>
- Virginia Department of Health (VDH) <http://www.vdh.virginia.gov/surveillance-and-investigation/novel-coronavirus/>

### **Dental Facts and Tips from the OIH Dental Team**

When decay-causing bacteria (which live in your mouth), come into contact with sugars and starches from foods and drinks, they form an acid which attacks your teeth. This acid attacks your teeth every time you drink or eat. These ongoing acid attacks can cause the tooth's enamel to lose minerals and weaken. Over time, this weakening can lead to the formation of a cavity or hole in the tooth. A "cavity" is a layman's term for the hole that is formed in a tooth by dental caries or tooth decay. Dental caries can also create tooth sensitivity to hot or cold food and drink and tooth pain. If dental caries are left untreated, an infection can form in the tooth pulp or gums. Infection can lead to facial swelling, fever, pain and/or an abscess (Mayo Clinic, 2020). An oral abscess is a pocket of pus that forms due to a bacterial infection associated with tooth decay.



Treatment for dental caries is usually a tooth "filling" procedure that is performed by your local dentist. When your tooth is "filled", the dentist cleans the affected area of the tooth and fills the cavity (dental caries) with some type of filling material. Fillings can prevent further tooth decay. Materials used for tooth fillings include gold, porcelain, a composite resin (tooth-colored fillings), or an amalgam that can be made from silver, copper, tin or zinc. If the cavity is too big, it can affect the layer of the tooth called the pulp. The pulp is the chamber of nerves in the tooth. Cavities that extend this deep will need to be treated with a root canal and a crown. If your dentist discovers that the tooth is unable to be saved from extensive decay, a tooth extraction will need to be performed.

It is very important to keep your teeth healthy and prevent dental caries. A well-balanced diet, daily tooth brushing with a fluoride toothpaste, daily flossing, drinking fluoridated water and living a tobacco-free lifestyle are all ways you can lower the risk of dental caries.

For more information regarding dental facts, tips or dental service inquiries please email the DBHDS Dental Team at [dentalteam@dbhds.virginia.gov](mailto:dentalteam@dbhds.virginia.gov)

Reference  
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Mayo Clinic (2020). Tooth abscess. <https://www.mayoclinic.org/diseases-conditions/tooth-abscess/symptoms-causes/syc-20350901>

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