



Eating and Swallowing After Stroke

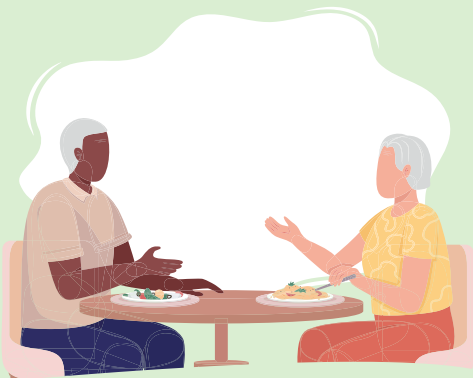
Dysphagia means trouble swallowing and can result from damage to the brain such as a stroke. When a person has dysphagia, they may need changes to their food textures and liquids to ensure that they can safely eat and drink.

What you should know

- ✓ Up to 65% of people will have dysphagia following a stroke
- ✓ Pneumonia can occur when food or liquids “go down the wrong way” (known as aspiration pneumonia)
- ✓ Oral care before and after meals and at bedtime can help reduce risk of aspiration pneumonia
- ✓ Fear of choking and/or a change in food texture or thickened fluids can result in poor intake. This can lead to weight loss and dehydration
- ✓ Social isolation can occur for many people living with dysphagia. It is important to include them in social activities and be sure they can join with safe food and beverage options

Smart Tips - Always follow the care plan!

Before you Start



- Perform hand hygiene
- Ensure the person is alert
- Follow the suggestions by therapy staff for use of assistive devices as needed (controlled sip cups, built-up utensil handles, plate guard, anti-slip mat, etc.)
- Ensure dentures are in place and fit well
- Place yourself face to face and at eye level with the person. If unable to do so, sit on the person’s unaffected side
- Check that the person is upright for the meal (unless otherwise noted in the care plan)
- Ask for help if you are not sure a food is right for the person. Check the care plan for safe options (e.g. popsicles, ice cream and/or milkshakes may not be okay for everyone)

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Look and Listen for the Following



- Pocketing of food or pills in the mouth or cheeks and under tongue
- Taking a long time to eat
- Drooling or spitting out food
- Shortness of breath after meals
- A wet or gurgly voice
- Throat-clearing
- Coughing or choking
- The person reporting that something is sticking in their throat, their throat feels tight or they describe signs of heartburn

During the meal



- Be patient and avoid rushing the meal
- Avoid talking when the person is eating
- Decrease distractions
- Support the person to eat slowly and feed themselves when able
- Confirm the mouth is clear before offering more food and again after the meal
- Food can look different when the texture has changed. Be sure to let the person know what they are being offered
- Be positive! This can have a big impact on how much the person will eat and their pleasure of mealtime

After the meal



- Keep the person seated upright for 30 minutes after eating
- Check for pocketing of food
- Encourage good oral care. Provide help when needed with brushing teeth/dentures before and after meals
- Use a soft toothbrush and avoid relying on oral swabs when assisting with oral care

Seek extra support

- ✓ Careful monitoring is vital because swallowing can change over time and affect a person's ability to eat and drink safely. If you see any changes in a person's eating or swallowing, report this to the team immediately
- ✓ Registered Dietitians and Speech Language Pathologists are experts in eating and swallowing. It may be helpful to involve them in the person's care

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