Medication

If the person with advanced dementia is having difficulty swallowing medications the prescribing doctor needs to know so that he/she can review medications. For essential medications the doctor may consider:

- Changing medications to a liquid, dispersible or soluble form
- Crushing tablets or opening capsules (NB do not open capsules or crush medications unless you have been told that this is suitable)
- Finding an alternative route of administration

An 'Unsafe' Swallow

There is no evidence of harm from continuing to offer small amounts of food and fluid at the end of life, provided that the person is correctly positioned and sufficiently alert when these are offered. Careful hand feeding ensures continuation of human contact and social interaction and can provide both stimulation and comfort, all of which help maintain quality of life at the end of life.

The information contained in this leaflet is designed as a resource for carers and relatives of people living with advanced dementia and is to be used as a guide only. Please contact your speech and language therapist with any specific concerns about safe swallowing in advanced dementia



With thanks to the Peterborough Palliative Care in Dementia Group, UK.

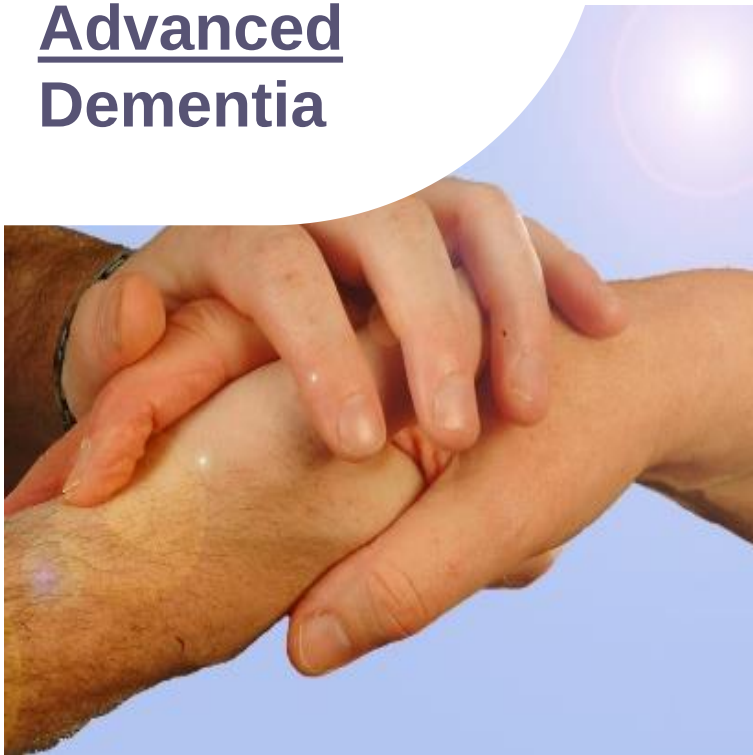
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PATIENT INFORMATION LEAFLET

A Practical Approach to Safe Swallowing in Advanced Dementia



How Dementia affects Swallowing

People with advanced dementia can frequently present with eating or swallowing difficulties. Maintaining adequate food/fluid and medication intake in the presence of advanced dementia can be very challenging.

Causes of swallowing difficulties in advanced dementia

Swallow difficulties can arise suddenly (acute) or more gradually (chronic)

Acute causes:

- Infection (e.g. oral, urinary, chest)
- Decline in consciousness due to acute illness
- Acute neurological event, e.g. stroke
- Medication side-effects
- Foreign body in throat

Chronic causes:

- Progression of dementia
- End of life (due to disease progression)
- Depression/Anxiety
- Throat stricture or tumour
- Progressive Neurological Disease (Parkinson's Disease, MND etc.)

Eating and Dementia

Often, the person with advanced dementia may have significant swallowing difficulties. The swallowing difficulties may be referred to as an 'unsafe' swallow but this does not necessarily mean that the person should stop eating. Advice from a speech and language therapist is essential as we can advise on swallowing strategies and appropriate positioning to minimise the risk of aspiration (food or fluids going 'down the wrong way') and maximise stimulation and comfort.

Practical Advice:

- Soft or pureed food and thickened fluids may be advised as these can be safer for people with swallowing difficulties to manage
- Try to make sure that food is hot or very cold as extremes of temperature stimulate swallowing
- Try to make sure that food is strongly flavoured, as this stimulates swallowing more strongly than bland flavours
- Alternate temperature and taste within a meal to stimulate the swallow
- Offer an ice cold drink prior to a meal or in-between mouthfuls to stimulate stronger swallowing
- Throughout the meal, keep reminding the person with dementia about the food/drink and remind them to swallow
- Make sure the person has swallowed before presenting another mouthful
- Use gentle, physical prompts to encourage self-feeding e.g. put the utensil/cup in the person's hand and help guide it to his/her mouth
- Provide food and fluids when the person is most alert
- Encourage small amounts of the correct texture of food/fluids frequently throughout the day
- Keep the eating environment calm, remove distractions
- Try to maintain good mouth care- brush teeth, rinse mouth etc.