

DYSPHAGIA

A person with dysphagia experiences pain or difficulty while swallowing.

Since about 50 pairs of muscles are involved when a person swallows, it is a complicated process.

There are three stages of swallowing. In the oral phase, a person drinks, sucks or chews and the tongue prepares the food or liquid for passage down the throat. As the tongue triggers the swallowing reflex, the pharyngeal phase begins; the voice box closes and breathing stops so that the food or liquid does not enter the airway. Finally, in the esophageal phase, whatever is being swallowed enters the esophagus, the tube leading from the throat to the stomach. Openings at the top and bottom of the esophagus relax and contract to aid the process.

It's possible for something to go wrong at any of these three stages, possibly requiring medical intervention.

CAUSES

Anything that weakens the muscles involved in swallowing or blocks the passageway contributes to dysphagia. Possible causes include:

- Diseases that affect the nervous system (including cerebral palsy and Parkinson's disease).
- A stroke or head injury.
- Cancer of the head, neck or esophagus. Treatment for these conditions also can contribute.

- Tumors.
- Spasms or lack of nerve control in the esophagus.
- Narrowing in the esophagus resulting from scarring from acid reflux disease.
- Inflammation of the lining of the esophagus.
- Growths in the chest.
- Being born with abnormalities in the swallowing system.
- Cleft palate.

SYMPTOMS

The following might indicate that a patient has dysphagia:

- Eating slowly.
- Trying to swallow a single mouthful of food several times.
- Feeling that food or liquids are sticking in the throat or esophagus.
- Chest or throat discomfort.
- Congestion in the chest after eating or drinking.
- Tiredness or shortness of breath while eating or drinking.
- Frequent respiratory infections.
- Vomiting frequently.
- Frequent sneezing after eating.
- Weight loss.

DIAGNOSIS

To find the cause of dysphagia, a healthcare provider such as a speech-language pathologist who specializes in swallowing disorders might talk with the patient about medical history and symptoms, evaluate how the person eats and swallows, and perhaps perform tests, including:

- Videofluoroscopic swallow study or barium swallow, in which the patient consumes food or drink containing the mineral barium. The physician watches the swallowing process on X-ray to find out where problems occur.
- Endoscopic assessment: A lighted tube is used to view the mouth and throat during eating and drinking. The tube also can be used to view the esophagus, stomach and small intestines.
- Manometry uses a tube to measure the pressure in the esophagus as the patient swallows.
- pH monitoring reveals how often acid from the stomach gets into the esophagus and how long it stays there.

TREATMENT

Depending on what's causing your dysphagia, your healthcare provider might recommend:

- Changing your head and neck posture while eating.
- Techniques such as tucking the chin while swallowing.
- Modifying the type, texture or bite size of the food you eat.
- Exercises to strengthen muscles used in swallowing.
- Dilation of the esophagus to provide a wide enough opening for food or drink to pass through.
- Medication to treat acid reflux.

MORE INFORMATION

UK Digestive Health Program:

859-257-1000 or

800-333-8874

ukhealthcare.uky.edu/digestive

American College of Gastroenterology:

www.patients.gi.org/topics/dysphagia

301-263-9000

American Speech-Language-Hearing

Association:

www.asha.org

800-638-8255