



Treating a Condition That Can Be Hard to Swallow

December 18 2013 9:46 AM

Halloween candy, Thanksgiving turkey, Christmas cookies, New Year's Eve toasts. Many of our holiday traditions center around food and drinks.

This is cause for concern for the many people, young and old, who have difficulty swallowing. We all get "choked" from time to time but imagine that feeling every time you eat or drink.



Difficulty swallowing, also known as dysphagia, can occur at any stage of the digestive process, from the mouth to the stomach and beyond. A problem in one area can affect

the entire swallow. Problems swallowing can also lead to other serious issues including weight loss, dehydration, aspiration pneumonia, urinary infections, anxiety, or depression.

Dysphagia is common in the [stroke](#) or brain- and spinal cord-injured populations. Certain problems with your nervous system, such as [post-polio syndrome](#), [multiple sclerosis](#), [muscular dystrophy](#), or [Parkinson's disease](#) often cause difficulty swallowing. Other causes include: [immune system](#) problems that cause swelling, [inflammation](#), and weakness, [Gastroesophageal reflux disease \(GERD\)](#), esophageal strictures, esophagitis, diverticula, or breathing problems. Tumors, cancer, or masses anywhere along the digestive tract (including the mouth, throat, esophagus, stomach, intestines, and colon) along with side effects from chemotherapy and radiation treatment frequently cause dysphagia. Patients who have scar tissue after surgery to the head, neck, or throat can have problems clearing food from the throat when eating. A dry mouth can also cause the problem or make it worse.

Persons with difficulty swallowing may notice coughing, gagging, choking on food or liquids, frequent pneumonias, a feeling that something is sticking in the throat or chest, frequent vomiting, pain when swallowing, loss of appetite, and/or weight loss.

There are many specialists involved in the evaluation and treatment of dysphagia, depending upon where the problem in the body is located. It's always best to start with your primary care physician.

Tests may be ordered to focus on the exact problem so specific treatment can be started. As a speech language pathologist, I work with primary care physicians; ENTs; gastroenterologists; and neurologists to diagnose and treat dysphagia. This treatment may involve diet changes, exercises, medications, or even surgery. One of the treatments speech therapists provide is neuromuscular electrical stimulation to the muscles of the face or throat, called Vital Stim.

More than half of the patients that we see in speech therapy at Alton Memorial Hospital have difficulty swallowing. It is very rewarding to help them improve swallowing function and begin to enjoy eating and drinking again.

Laura Bastin is a speech language pathologist at Alton Memorial Hospital's Human Motion Institute.