## Dysphagia: Supporting People with Swallowing Difficulties

## Eating and drinking is an important part of health and wellbeing: not just important for nutrition and hydration, eating and drinking also impacts social inclusion and community participation.

It is well documented that there is a higher incidence of dysphagia in individuals presenting with cerebral palsy and like conditions across the lifespan, than in the general population. Swallowing difficulties can be present from birth and will change as people with cerebral palsy age. Adults with dysphagia are likely to notice changes from 30 years of age (Balandin et al 2009) - 30 is reported to be the age that those with cerebral palsy most commonly notice changes to their swallowing capacity - but these changes may happen at any time. In individuals with cerebral palsy under the age of 26, respiratory problems are found to not only relate to the severity of the cerebral palsy but also to factors including motor function and coordination of muscles in the mouth and throat(Blackmore et al 2016). Research has also shown that 97% of children with cerebral palsy who aren't walking are likely to be silent aspirators, with food aspiration being the highest risk (Pruitt and Tsai 2009).

## A team approach to dysphagia support

Dysphagia is best managed by a health care team at the primary, community and tertiary level of medical care needs.

Swallowing difficulties are not regularly reported on by people with physical disabilities. It is important that all health professionals seeing people with physical disabilities ask questions and provide information so that problems can be detected and addressed as early as possible.

The CP-Checklist is a valuable resource that can be completed online at any age. Although created for individuals under the age of 25 and for cerebral palsy, the checklist is useful for people of all ages and physical disability.

Visit <u>futurethinking.</u> <u>abilitycentre.com.au</u> for more information. The following links and literature may also be useful:

CP-Checklist - <u>www.abilitycentre.com.au/</u> <u>cp-checklist</u>

National Foundation of Swallowing Disorders - <u>www.</u> swallowingdisorderfoundation.com

Speech Pathology Australia – <u>www.</u> <u>speechpathologyaustralia.org.au</u>

Balandin, S., Hemsley, B., Hanley, L., & Sheppard, J. J. (2009). Understanding mealtime changes for adults with cerebral palsy and the implications for support services. *Journal of Intellectual & Developmental Disability*, 34(3), 197-206. <u>https://doi.</u> org/10.1080/13668250903074489

Blackmore, A.M., Bear, N., Blair, E., Gibson, N., Jalla, C., Langdon, K., Moshovis, L., Steer, K., & Wilson A.C. (2016). Prevalence of symptoms associated with respiratory illness in children and young people with cerebral palsy. *Developmental Medicine and Child Neurology*, 58(7). <u>https://doi. ord/10.1111/dmcn.13016</u>

Bottos, M., Feliciangeli, A., Sciuto, L., Gericke, C., & Vianello, A. (2001). Functional status of adults with cerebral palsy and implications for treatment of children. *Developmental Medicine and Child Neurology*, 43(8), 516. <u>https://doi. org/10.1017/S0012162201000950</u>

Pruitt, D. W., & Tsai, T. (2009). Common medical comorbidities associated with cerebral palsy. *Physical Medicine and Rehabilitation Clinics of North America*, 20(3), 453–467. <u>https://doi.org/10.1016/j.</u> <u>pmr.2009.06.002</u>

