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Adult Dysphagia: Interprofessional Support Groups and Holistic Approaches

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Interprofessional Support: A Holistic Approach to Dysphagia Intervention

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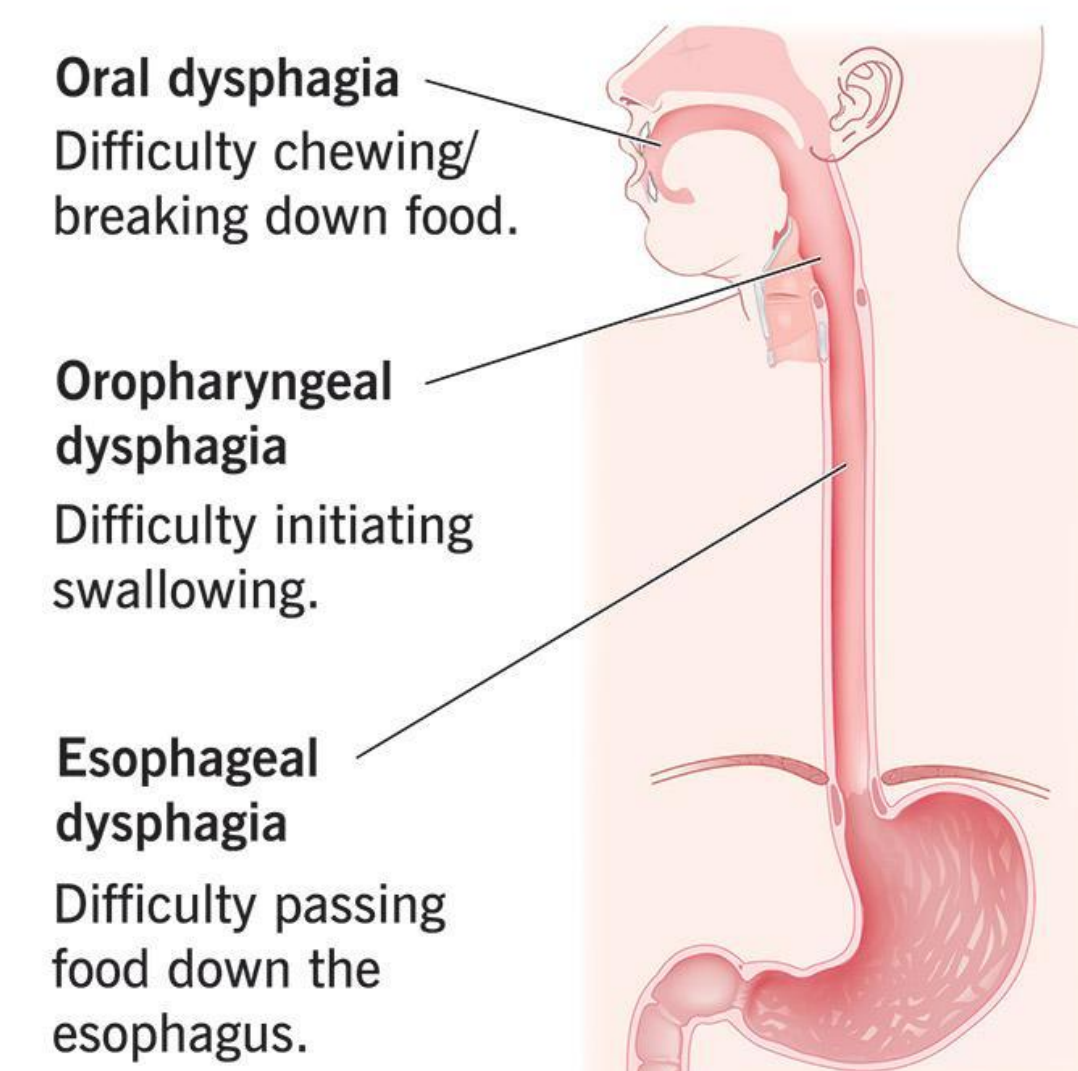
Natalie Bekmetjev, Abigail Mosher

Introduction

Causes

- Head and neck cancers
- Stroke
- Dementia
- GERD
- Parkinson's disease

Dysphagia (difficulty swallowing)



Psychosocial Impacts

- Shame and fear leading to social withdrawal
- Dependency causing stress and embarrassment
- Loss of enjoyment and depression

Existing Research

- Recent studies show that interdisciplinary support is the most effective approach in improving the quality of life of individuals with dysphagia.

Goals of Study

- Provide IP support for individuals with dysphagia and their caregivers & evaluate group with pre/post measures
- Provide training opportunities for students regarding IP collaboration

Methods (Pre and Post)

- Mini-Mental Status Exam (>24 required for participation)
- Self-report symptom inventory
- SWAL-CARE - Current care and satisfaction with care
- SWAL-QOL - Quality of Life & Mood
- Zerit Burden interview - Caregiver burden
- CARES - Caregiver report of patient's symptoms

Participants

Age	Gender	Cause
84	Male	Parkinson's Disease
76	Female	Throat Cancer/Radiation
86	Male	Loss of Teeth/Surgery
79	Male	Spinal Surgery/Cardiac
83	Female	Jaw Cancer/Surgery/Radiation
82	Female	Esophageal narrowing/pocket

Caregivers

Age	Gender	Cause
80	Female	Husband has Parkinson's Disease
78	Female	Husband had Parkinson's
81	Female	Husband has Spinal/Cardiac issue

Interprofessional Support Group

- Three types of sessions:
 - **Focus** - Discussion led by specific questions and topics
 - **Educational** - Providing information about dysphagia-related topics and answering participants' questions
 - **Support** - Open discussion (led by a social worker) based on the members' needs and concerns.
- Who's running them?
 - Speech-Language Pathology and Audiology
 - Nursing
 - Social Work
 - Psychology

Impacts (January transcript)

Cultural

- "I didn't, this christmas, I did not walk to the buffet table. I took nothing from there, because there's danger of choking if it's something I'm not familiar with. Uh, it just takes too much effort. Uh, but it would be— just be nice to be back to normal."
- "Um, [to enjoy] certain ethnic meals, um, in my husband's family, because they had lived in and worked in the country of Ethiopia. Their most special meal is Ethiopian cuisine, and it's so very delicious, I would love to eat it again. But it's a challenge right now."

Religiousness

- "I'll never forget, the first time, a few months ago, that I took communion and I was worried ahead of time, 'Am I going to choke on this?'"
- "I was going to communion, and I remember thinking, 'what am I going to do if I can't swallow?' It's always in the back of my mind, you know."

Psychological

- "When I was diagnosed with cancer, my daughter was getting married that summer. And, I remember [inaudible] and saying, you know, saying, 'Why me? Why me?'"
- I remember being at, um, a funeral... I got such a coughing spell...It was just so embarrassing."
- "But because it's hard to enunciate, it's harder to participant i-in the talking and uh, discussion things. And I'm just very thankful that, that anyone can understand me."

Data Collection & Analysis Plans

- Collect post-questionnaires/interview at end of April/early May 2024
- Ongoing qualitative data analysis from focus group sessions
 - Physical impact of dysphagia
 - Psychosocial impact of dysphagia
 - **Cultural & Religious/Spiritual impact of dysphagia**