

UW-Madison School of Medicine and Public Health: Swallowing problems increase risk of death, nursing home admissions

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MADISON, Wis. – Patients with trouble swallowing following a stroke or other medical event are more likely to die in the hospital, and had longer and more expensive hospital stays, according to analysis led by researchers from the UW School of Medicine and Public Health.

Dysphagia, or disordered swallowing, can follow a stroke, the onset of Parkinson's and other diseases, or be the result of trauma, surgery, or cancer treatment.

Dr. David Francis, assistant professor of surgery and an otolaryngologist with UW Health, says the burden of dysphagia to patients and to the U.S. health system as a whole has not been recognized.

“We wanted to better understand the burden of the disease,” says Francis, the study's senior author. “The consequences of dysphagia go unrecognized because it's often seen as the symptom of other diseases. It is rarely listed as a cause of death, but is a consequence of many conditions that ultimately leads to patients' demise.”

Francis and co-authors, including Dr. Michelle Ciucci, associate professor of

communication sciences and disorders and surgery, analyzed a national database of patients hospitalized in the United States between 2009 and 2013. They found that about three percent of patients 45 or older (about 2.7 million patients) were diagnosed with dysphagia. Compared with other patients, those with a diagnosis of swallowing problems had nearly double the chance of dying while in the hospital. They stayed in the hospital an average of 3.8 days longer, had hospital bills that averaged \$6,243 higher, and when they were discharged, they were 33 percent more likely to need nursing-home care.

The researchers saw these concerning trends stay stable over the five years of the study.

“This shows we aren’t recognizing the problem, and haven’t made progress in reducing the population-level morbidity or mortality related to dysphagia over this time period,” Francis says.

If untreated, dysphagia can cause patients to aspirate food and liquid into the lungs, leading to infections, aspiration pneumonia, and death.

However, if dysphagia is identified early and its cause diagnosed, Ciucci says, it can be treated in a variety of ways. Solutions range from changing the food and liquids so they are more difficult to aspirate into the lungs to behavioral therapy that teaches new ways of swallowing that protect the airway.

“This is a huge quality-of-life issue for patients,” she says. “Imagine not being able to eat food when you are hungry, or take a drink when you are thirsty. Much of our daily lives revolve around dining.”

The study was published in *Diseases of the Esophagus*, an Oxford University journal. The lead author is Dr. Dhyanes Patel, of Vanderbilt University Medical Center.