

INTEGRATION OF THE HOSPITAL PHARMACIST INTO A MULTIDISCIPLINARY DYSPHAGIA SCREENING TEAM IN AN INTERMEDIATE AND LONG STAY HOSPITAL



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BACKGROUND AND IMPORTANCE

Dysphagia can occur due to a wide range of medical conditions including acute or progressive neurological disorders, trauma or surgery, with secondary effects such as dehydration and malnutrition causing an increase in morbidity and mortality rates. Dysphagia screening and assessment of swallowing function by a multidisciplinary care team is essential to identify, diagnose and manage patients with dysphagia

AIM AND OBJECTIVES

To analyse the results of dysphagia screening and the benefit of including a hospital pharmacist in the multidisciplinary dysphagia screening team in an intermediate and long stay hospital.

MATERIALS AND METHODS

A prospective study of dysphagia screening and subsequent interventions was performed over a 2 week period in all patients hospitalized in an intermediate and long stay hospital. Data was obtained from the medical record program EKON®.

- ✗ Age
- ✗ Sex
- ✗ Primary Diagnosis
- ✗ Diet
- ✗ Diet texture needed

MULTIDISCIPLINARY TEAM

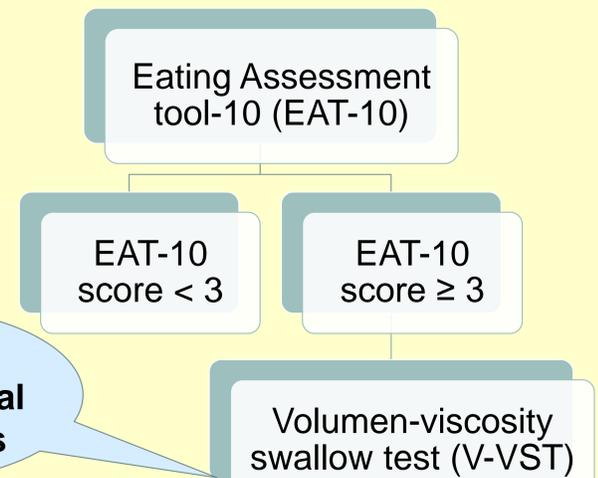


A nurse, a physician and a hospital pharmacist and nutritionist.



Dietary and pharmaceutical interventions

DYSPHAGIA SCREENING PROTOCOL



86 PATIENTS

57% men (n=49). Mean age of 74 years (39-102).

RESULTS

The mean EAT-10 score was 8 ± 9 points with 33 patients (38%) testing positive for being at risk of presenting dysphagia. Of these patients at risk, the V-VST detected dysphagia and the necessity of a nectar consistency in 21 patients (64%), a honey consistency in 2 patients (6%) and a pudding consistency in 2 patients (6%).

Nectar like liquids	<ul style="list-style-type: none"> • Easily pourable • Comparable to thick syrup • Forms a thin web over the prongs of a fork 	
Honey like liquids	<ul style="list-style-type: none"> • Slightly thicker, drizzles when poured • Comparable to honey • Forms a thick web over the prongs of a fork 	
Spoon thick/ Pudding like liquids	<ul style="list-style-type: none"> • Not pourable, holds their shape • Comparable to yoghurt • Sits on the prongs of a fork 	

Dietary and pharmaceutical interventions were made in 17 patients (68%) of those diagnosed with dysphagia, including **modifications of the diet texture, tailoring of medical formulations available or drug administration mixed with more textured food.**

CONCLUSION AND RELEVANCE

Dysphagia screening in intermediate and long stay hospitals is not common practice even though there is a high prevalence and important clinical repercussions in these settings. A hospital pharmacist plays an important role as part of the multidisciplinary team making the necessary pharmaceutical interventions needed in patients with dysphagia.