IMPACT OF DYSPHAGIA IN COVID-19 CRITICAL INTENSIVE CARE PATIENTS IN A REGIONAL HOSPITAL

BACKGROUND AND IMPORTANCE

Oropharyngeal dysphagia is a commonly underestimated disorder. Dysphagia may affect nutrition and therapeutics in hospitalised patients.

AIM AND OBJECTIVES

The aim of this study is to evaluate the incidence of dysphagia in Covid-19 patients hospitalised in the Intensive Care Unit (ICU).

MATERIAL AND METHODS

- Observational retrospective study performed during 3 months in an ICU of a regional hospital with 365 beds.
- The following variables were collected: demographic data, days in the ICU, existence of intubation, dysphagia test (DT) made by speech therapist and dysphagia after hospital discharge.
- The DT was performed on patients who received artificial nutrition before starting oral nutrition.

RESULTS

- Covid-19 hospitalised patients: 281
- Covid-19 critical patients: 33 (11.7%)
- Age of critical patients: 63.1 (±11.6) years old
- Sex: 22 (66.7%) men
- Average hospital stay in ICU: 28.3 days (±25.2)
- Presence of dysphagia during hospital stay in ICU: 17 (51.5%)
- Patients with dysphagia after hospital discharge: 8 (47%)

CONCLUSIONS

- Dysphagia demonstrated to be a frequent complication in ICU Covid-19 patients intubated more than 48 hours.
- The DT performed and the speech therapy follow-up encouraged the improvement of such patients in term of swallowing degree through rehabilitation and helped taking dietary precautions. The recovery from dysphagia was complete before hospital discharge in almost half of the patients.
- The incidence of this complication is high enough to be considered by the Pharmacist because of the implication in the pharmacologic therapy and patient nutrition.