

Prevalence of Oropharyngeal Dysphagia in Patients with Stable COPD

Gonzalez Lindh M^{1,2}, Larsson L² and Koyi H^{2,3}

¹Dept of Neuroscience/Speech and Language Pathology, Uppsala University, Sweden

²Centre for Research and Development, Uppsala University/County Council of Gävleborg, Gävle, Sweden

³Department of Respiratory Medicine, Gävle Hospital, Sweden

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Abstract

Introduction: The effect of Chronic Obstructive Pulmonary Disease (COPD) on swallowing is a relatively new research area and prevalence of oropharyngeal dysphagia in patients with COPD is not yet fully understood. The aim of this study was to test 51 patients with moderate to severe COPD while being in a stable phase of the disease, using a water swallow test, a cookie swallow test and a questionnaire to explore the prevalence of oropharyngeal dysphagia. Was it possible to determine at what stage of the disease (GOLD) the patient starts experiencing symptoms of dysphagia and is there a difference between men and women regarding dysphagia burden.

Materials and methods: Fifty one patients with an $FEV1 \leq 75\%$ of predicted were enrolled prospectively. Spearman's rank correlation coefficient was used to identify possible correlations between lung function and signs/symptoms of oropharyngeal dysphagia.

Results: Among all, 65% of the patients experienced some sort of subjective swallowing dysfunction when asked; coughing, choking or bolus retention. Another 49% showed signs/symptoms (s/s) of measurable oropharyngeal dysphagia in the objective testing. If all data was considered (subjective+objective) 78% showed some form of swallowing dysfunction (severity not graded). A significant correlation was found between lung function (FEV1%) and 1) subjective s/s, 2) objective s/s and 3) all s/s of dysphagia. No significant difference was found between men and women in regard to dysphagia burden.

Discussion: These results confirm the growing body of evidence suggesting that a subgroup of people with COPD is prone to oropharyngeal dysphagia.

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