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## Information for Patients/Carers Swallowing Problems after intubation

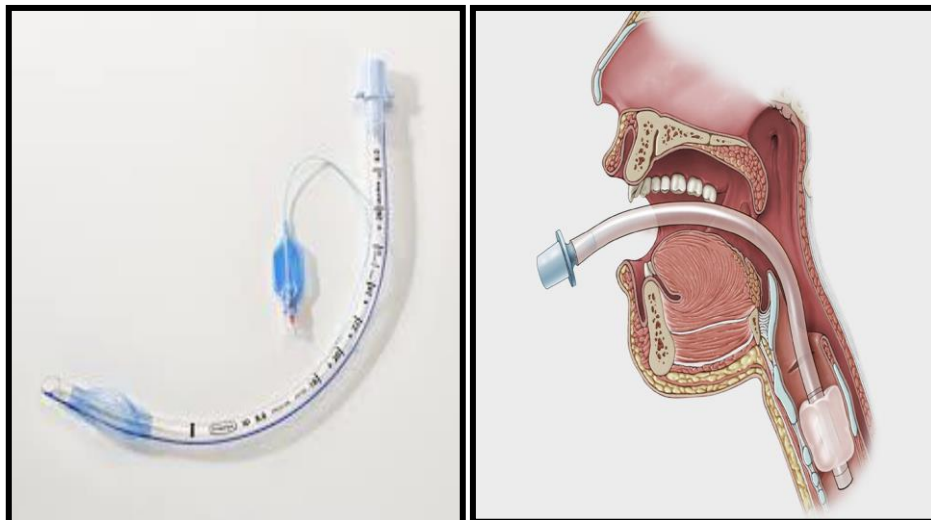
### Speech and Language Therapy

#### Swallowing problems after intubation

**The aim of this information sheet is to answer some of the questions you may have about changes to your swallowing after intubation in intensive care. If you have any further questions or concerns after reading this leaflet, please contact us on the number provided. We can then give you further information and sign-post you to Speech and Language Therapists who can help.**

#### What is intubation?

A small plastic breathing tube (called an endotracheal tube) is inserted into your throat to help you breathe during your operation or illness. The tube passes through the vocal cords within your windpipe. For some patients this can cause the throat and windpipe to become inflamed and may mean your vocal cords do not work properly. The longer you need this tube, the more likely you are to have swallowing or voice problems after it is removed.



## **What else might affect my swallowing in intensive care?**

There are a number of treatments / procedures given in intensive care that are necessary to support you through your illness. Some of them can affect swallowing, eating and drinking. The medicines we need to give patients to keep them 'sedated', can cause swallowing problems. Delirium is common in intensive care and can mean people are not aware of their surroundings or able to do things they would normally, including sit up, talk, eat and drink. Many patients become physically very weak, very quickly and this can also affect your swallowing, eating and drinking. People who need extra oxygen to support their breathing or who are breathless after the breathing tube is removed may find it difficult to coordinate breathing and swallowing. If you already had swallowing problems prior to being in intensive care, perhaps due to another medical condition, you may find things worsen due to being intubated. Around half of patients who have been intubated have swallowing difficulties at least in the short term.

## **How might my swallowing be affected?**

You may be experiencing one or more of the following:

- Coughing or choking when you eat or drink
- Feeling of food getting stuck after swallowing
- 'Wet' sounding voice after eating/drinking
- Sore throat or pain when swallowing
- Weak cough
- Problems with 'too much' saliva
- Chest infections

## **What can I do to help my swallowing?**

- Make sure you are sat upright to eat and drink
- Concentrate on eating and drinking
- Take your time – don't rush meals or drinks
- Don't try to talk whilst eating and drinking
- Take smaller mouthfuls of food at a time, finish one before taking the next
- Avoid 'downing' drinks – take small single sips at a time
- Keep your mouth and teeth clean – this will reduce the likelihood of chest infections
- Try to avoid caffeinated drinks or spicy foods that may cause acid reflux

## **Will my swallowing return to normal?**

Most patients find that their swallowing gets better over time, in the days and weeks after their intensive care stay. However, there are a few patients who may experience problems for longer. In this case, you may need tests to investigate further, as well as therapy to help you recover. Speech and Language Therapists are specialists in this area and can assess your swallowing, help you to understand what is wrong and make a treatment plan with you.

## **Contact us**

If you have any questions or concerns about any of the information in this leaflet, please contact the **Speech and Language Therapy** department:

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