

### definition

difficulty or discomfort in swallowing that persists over a prolonged period of time

### dysphagia diet simplified

diet 1	thin liquids	fruit juice, coffee tea
diet 2	nectar thick liquids	cream soup, tomato juice
diet 3	honey thick liquids	liquids that are thickened to a honey consistency
diet 4	pudding thick liquids/foods	mashed bananas, cooked cereals, purees
diet 5	mechanical soft food	meat loaf, baked beans, casseroles
diet 6	chewy foods	pizza, cheese, bagels
diet 7	foods that fall apart	bread, rice, muffins

### oral motor problems

poor lip closure	Food and liquid escape through the lips, causing drooling and loss of food during chewing and swallowing.
poor lateralization of tongue movements	Poor formation of the bolus prior to swallowing, pocketing of food in the cheeks due to the inability of the tongue to clear food.
tongue thrust	Food is pushed out of the mouth instead of up and back toward the throat.
poor lateral movement of the jaw	Ineffective formation of the bolus, food particles may be too large to swallow.
misaligned or weak bite	Inability to take small pieces of food into the mouth

### ot tx

poor postural control  
Position the patient sitting upright with head and spine aligned in neutral, hips and knees at a 90 degree angle, and feet on the floor. -use head, lateral and pelvic supports if the patient is unable to maintain this position independently. -if the patient cannot get out of bed, position the patient in bed as close to the upright neutral position as possible.

### ot tx (cont)

poor upper extremity control	-facilitate hand to mouth movement patterns during neuromuscular treatment. -provide adaptive eating utensils and dishes to compensate for weakness, tremor, athetosis, or other upper extremity problems.
poor lip closure	Manual stimulation including: -light touch to the midline of the lips -firm maintained pressure around the lips. -stretch pressure around the lips. Sucking and blowing activities: -blow bubbles through a straw -suck on a popsicle -blow up a balloon
poor tongue mobility, tongue thrust	-tongue "exercises" including up/down and side to side movement, repetitive tongue tip sounds, holding the tongue behind the upper teeth. -licking flavor off the lips, i.e. rub a lollipop on the lips and have the patient lick the flavor off. -facilitating tongue retraction during feeding by pressing the bowl of the feeding spoon on the middle of the tongue before withdrawing it from the mouth.
weak or misaligned bite	-use chew tubes for oral motor exercise -bite and hold objects in the teeth (make sure objects are safe to bite) -use handling techniques to align the jaw and facilitate lower jaw mobility during feeding.

### ot tx (cont)

oral sensory problems -use a z-vibe or other small vibrator to provide vibratory input to the mouth, lips, and facial areas -aromatherapy - deep pressure and proprioceptive activities to all joints - present new food items one at a time in a fun, non-threatening manner. -match food textures and temperatures to the patient's oral motor abilities.

impaired cognitive abilities -use sectioned dishes to separate foods of different textures. -use high contrast place settings, i.e. white plate on blue placemat. Make sure food colors contrast with plate. -provide smaller size utensils to control amount of food that enters the mouth.

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Not published yet.  
Last updated 21st October, 2023.  
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