

# Oropharyngeal Dysphagia in Adults

- Prevalence, professional practices, patient perspectives and treatment outcomes

Akademisk avhandling

Som för avläggande av medicine doktorsexamen vid Sahlgrenska akademien, Göteborgs universitet kommer att offentligen försvaras i K Isaksson, Medicinaregatan 16, den 14 juni 2023, klockan 9.00.

av Maribeth Caya Rivelsrud

Fakultetsopponent:

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## Avhandlingen baseras på följande delarbeten

- I. Rivelsrud, M. C., Kirmess, M., & Hartelius, L. (2019). Cultural adaptation and validation of the Norwegian version of the swallowing quality of life questionnaire (SWAL-QOL). *Health and quality of life outcomes*, 17(1), 179.
- II. Rivelsrud, M. C., Hartelius, L., Bergström, L., Løvstad, M., & Speyer, R. (2023). Prevalence of oropharyngeal dysphagia in adults in different healthcare settings: a systematic review and meta-analyses. *Dysphagia*, 38(1), 76–121.
- III. Rivelsrud, M. C., Hartelius, L., Speyer, R., & Løvstad, M. (2023). Qualifications, professional roles and service practices of nurses, occupational therapists and speech-language pathologists in the management of adults with oropharyngeal dysphagia: a Nordic survey. *Logopedics, phoniatrics, vocology*, 1–13. Advance online publication.
- IV. Rivelsrud, M.C., Antonsson, M., Løvstad, M., Speyer, R., Johansson, K., & Hartelius, L. Effects of expiratory muscle strength training on swallowing function in people with Parkinson's disease or multiple sclerosis as assessed by flexible endoscopic evaluation of swallowing. *Manuscript*

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## Abstract

*Background:* Oropharyngeal dysphagia (OD) is defined as any disruption in the transportation of food/liquids safely and efficiently from the mouth, through the pharynx and into the esophagus. The underlying causes of OD in adults are numerous and the consequences may have devastating effects on a person's health and quality of life.

*Overall aim:* Contribute to a stronger evidence base for the identification and treatment of OD in adults.

*Results:* Study I was a cultural adaptation and validation study resulting in the first valid and reliable dysphagia-specific health related quality of life questionnaire for the Norwegian population. Study II was a systematic review and meta-analyses that revealed considerable heterogeneity in the definition of OD and type and quality of outcome measures used to determine prevalence. Estimated pooled OD prevalence of 36.5%, 42.5% and 50.2% in the hospital, rehabilitation and nursing home settings, respectively. There were no eligible studies identified for OD prevalence in palliative care. In Study III survey results from 396 nurses, occupational therapists and speech-language pathologists in the Nordic countries showed notable professional role differences between countries, minimal education and practical training in OD, and limited use of evidence-based practice in screening, assessments and rehabilitative treatment for OD. Study IV was an exploratory randomised control study including 15 participants with Parkinson's disease or multiple sclerosis. Findings revealed no change in swallowing function following expiratory muscle strength training, as assessed by flexible endoscopy, despite significantly improved maximal expiratory pressure and positive results from patient-reported outcome measures.

*Conclusions:* There is a high prevalence of OD in healthcare settings. Currently, education curriculums and use of existing evidence-based outcome measures and rehabilitative treatment in the management of adults with OD in the Nordic countries are minimal. The inclusion of patient-reported outcomes in the management of OD is needed along with continued research in the use of rehabilitative treatments of OD in people with Parkinson's disease or multiple sclerosis.

**Keywords:** Swallowing, assessment, rehabilitation, quality of life, evidence base

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