

Oesophageal dysphagia

Strategies to support eating and drinking

What is Oesophageal dysphagia?

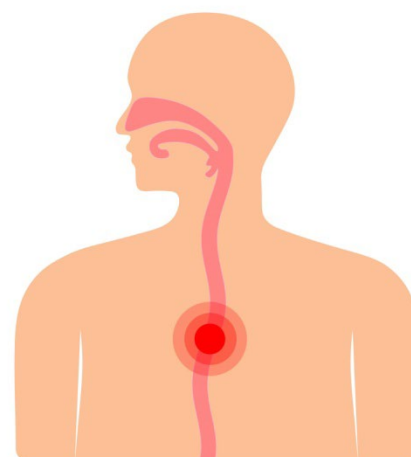
Oesophageal dysphagia describes difficulties with eating, drinking and swallowing as a result of a difficulty moving food through the oesophagus (or “food pipe”). There are many possible causes for oesophageal dysphagia including:

- **Oesophageal dysmotility**, which occurs when contractions in the oesophagus become irregular, unsynchronised, or absent. This means food is not moved smoothly through the oesophagus.
- **Oesophageal spasm** is a sudden, abnormal clenching of the oesophagus. This can prevent food from moving through the oesophagus.
- **Oesophageal achalasia** is reduced contractions in the oesophagus combined with failure of the lower oesophageal sphincter to relax in response to swallowing.

This guidance would not be suitable for those with a narrowing or blockage of the oesophagus who have been recommended a liquidised diet.

Symptoms may include:

- Difficulty swallowing (dysphagia)
- A “sticking” sensation when eating or drinking
- Discomfort when eating
- Coughing when eating
- Regurgitation (food coming back up)
- Heartburn/acid reflux
- Bad breath and/or unpleasant taste in mouth
- Persistent irritable cough or need to throat clear
- Weight loss
- Frequent chest infections



Strategies to support ease/comfort of eating and drinking:

- Choose naturally soft, moist food
- Mash or puree food (ask for an adapted menu)
- Avoid tougher foods, e.g. chewy meats, doughy bread, and hard skins
- Avoid acidic foods, e.g. citrus fruits, tomatoes if they make symptoms worse
- Avoid acidic drinks, e.g. juice, fizzy drinks if they make symptoms worse
- Avoid alcohol, caffeine, and cigarettes

Strategies when eating:

- Take an extra swallow of your saliva between each mouthful
- Try taking small sips of drink between mouthfuls of food
- Eat slowly and take small mouthfuls
- Eat smaller meals more frequently throughout the day
- Chew your food well before swallowing
- Sit upright when eating and stay sitting upright for approximately 30 minutes after meals
- Don't eat late in the evening (try to eat at least 2 hours before bed)
- Make sure you keep your teeth and/or dentures and mouth clean to minimise bacteria
- Consider adding extra sauces to your foods to help moisten them e.g. gravy, cream or custard
- If symptoms persist, seek a referral to Speech and Language Therapy
- Consult your GP/Pharmacist for difficulties swallowing medication

Maximising your nutrition:

If you are losing weight, try fortifying your meals to add in extra calories:

Fortify your food	
<ul style="list-style-type: none">– Add butter, olive oil, or mayonnaise to sandwiches, potatoes or pasta	These approaches will increase the calories and protein in each serving of your meals, without needing to increase your portion size
<ul style="list-style-type: none">– Try to include a protein with each meal, for example: tender meats, boneless fish, eggs, lentils, or cheese	
<ul style="list-style-type: none">– Choose full fat milk, cream, cheese, and full sugar foods	
<ul style="list-style-type: none">– Add cheese or cream to soups, mashed potato, curry, and pasta dishes or scrambled egg	
<ul style="list-style-type: none">– Add cream or condensed milk to puddings	
<ul style="list-style-type: none">– Fortified milk - add extra “skimmed milk powder” to full fat milk to further increase nutrition. Use this milk on cereal, in puddings and hot drinks, soups or mashed potatoes	Fortified milk: Add 4 tablespoons of skimmed milk powder to 1 pint of full cream milk. You can buy skimmed milk powder at most supermarkets

- Try to eat little and often. Aim for 3 small meals with 2-3 snacks each day
- Avoid low fat or sugar-free foods
- Try to have puddings with your meals, such as creamy yoghurts, milky puddings or ice cream

- Full fat dairy alternatives can be used
- Try homemade smoothies or soups
- Shop bought nourishing drinks or soups are a good way of improving your energy and protein intake. Take them between meals to avoid them filling you up at mealtimes. They are available to buy from both supermarkets and pharmacies
- Monitor your weight and seek further health professional advice if needed. A referral to Dietetics may be required
- If you're diabetic, please discuss any dietary changes with the Diabetic Team

Symptoms of heartburn or acid reflux

Speak to your GP if you are concerned about heartburn or acid reflux, as there are medications that can help to manage symptoms.

Easier to manage foods	Foods which may need adapting, eaten with care or avoided if they worsen symptoms (e.g., cut up small, soften or combine with more moist foods)
Porridge, Ready Brek, oatmeal Soft cereals soaked in milk Soft cakes moistened with sauce Biscuits and shortbread dunked in a hot drink	Cereals with dried fruit/ nuts e.g., muesli or granola Fresh and doughy bread Crusty dry bread Bread with seeds, nuts, grains Bagels and hot cross buns Flapjacks, brownies, doughnuts Well buttered toast Stale bread dunked in soup Crispbreads (unseeded)
Mashed potato Baked potato without skin Well cooked pasta or rice with sauce	Hard/crispy chips Roast potatoes Skin of jacket potatoes Fried rice
Tender meat cooked in sauce Tinned meat in sauce Minced meats and poultry in sauce	Tough, fibrous, or gristly meat Large chunks of meat Hard, crispy, or stringy meat e.g., bacon, steak, chops Battered meat
Flaked fish in sauce Fish with bones removed Poached or steamed fish Fish pie with extra sauce Crab/lobster meat with sauce Fish cakes with sauce	Fish with bones or skin Battered or dry fish Shellfish (e.g., prawns, muscles, cockles, oysters) Calamari, squid, octopus
Eggs scrambled, poached, soufflé,	Rubbery hard-boiled egg

omelette with sauce Soft boiled eggs (mixed with butter or mayonnaise)	Crispy fried egg white
Grated cheese, cream or cottage cheese, cheese sauces	Any cheese with nuts or dried fruit Lumps of hard cheese
Soft, well-cooked vegetables Mashed or pureed vegetables Baked beans/soft pulses Smooth vegetable pate	Raw vegetables and green salads Stringy vegetables (e.g., celery, okra, green beans, leeks)
Soft, peeled fruit Smooth fruit juice	Fruit skins, pips, or pith Raw hard fruit /dried fruit Fibrous fruit e.g., pineapple or citrus fruit
Crisps that melt in the mouth Boiled sweets not swallowed whole Smooth spreads and nut butters Chocolate buttons	Dried fruit and nuts Hard crisps or popcorn Crunchy nut butters

Contact numbers:

Speech & Language Therapy: 0131 537 3319

Dietetics: 0131 537 1298

Gastroenterology: 0131 537 1789

It's OK to Ask

When you understand what's going on with your health, you can make better decisions around your care and treatment.



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