

UK Swallow Research Group 🍴

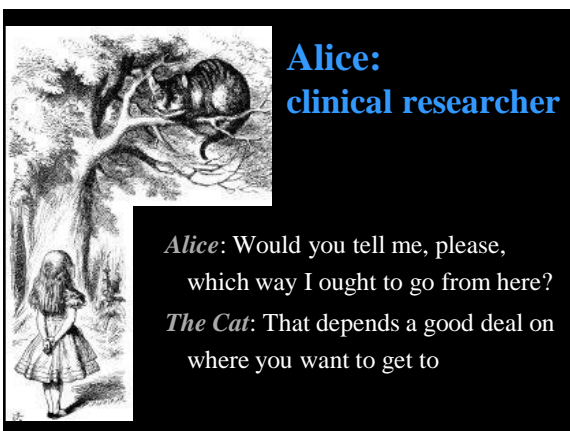
2010 a swallow research odyssey

Paula Leslie



Why do we research what we do?

- To understand physiology
- To understand treatment effects
- Because we can



Alice: clinical researcher

Alice: Would you tell me, please,
which way I ought to go from here?
The Cat: That depends a good deal on
where you want to get to

The Great & the Good

- What was biggest single “discovery” in dysphagia research for you in last 20 years?
- Where should we go with research?
 - pick one place only
 - funding & fashion be damned.....

Thanks to all including: Charlotte Buswell, Mary Casper, Jim Coyle, Hannah Crawford, Stephanie Daniels, Pippa Hales, Chris Matthews, Joe Murray, Lin Perry, Catriona Steele

Smoke & mirrors

- 1980s
 - “Cookie swallow test”
 - Thermal-stim
- 1990s
 - Thickeners
- 2010s
 - Treatment

Paediatrics

- Aspiration
- +
- Gastro-oesophageal reflux
- =
- Worse respiratory problems

Exercise

- Patients get sick
- Patients don't eat
- Patients get PEGs
- Lost to follow-up?
- Exercise to get these people eating sooner

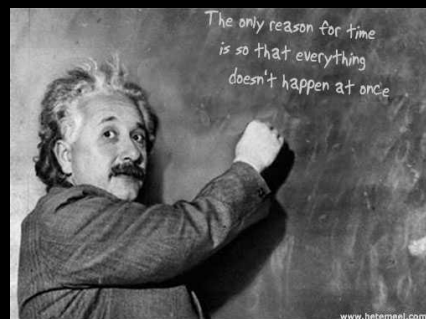
Cleanliness

- Oral hygiene status matters
- Aspiration is a red herring
- Long term outcomes

From one extreme

- Healthy swallows vary
- Age is a normal process
- Lesions in the cortex
- Is the brain plastic enough

When – not how much



Safety

- 1980s - stroke caused dysphagia
- 1990s - screening was still about gag
- 2000s - good screening impacts outcomes

Dark side

- Risk averse culture
- Fix individual symptoms
- Serious long term consequences

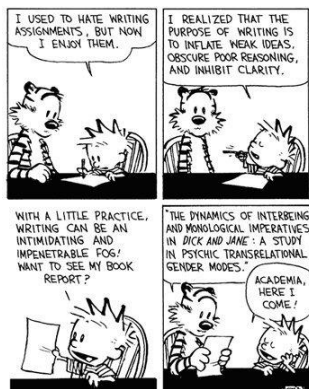
Treatment

- Effective
- Doable
- Like by patients
- Paediatric positioning trois points
- Paediatric gastrostomy beaucoup de points

Swallow knowledge is not

- Decent nutrition
- Eating is psychological
- Quality of life

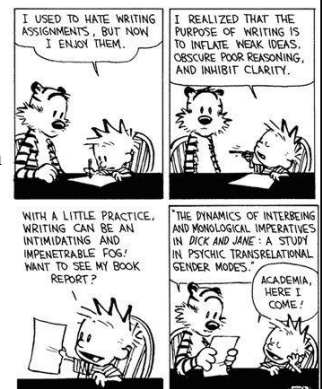
Design & writing



Calvin & Hobbes

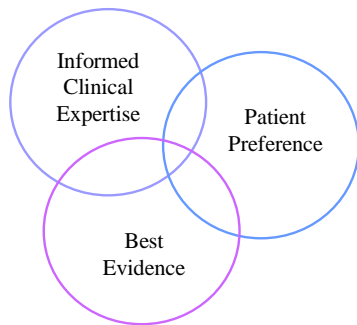
Design & writing

- Make studies clean
- Write clearly
- Publish less crap



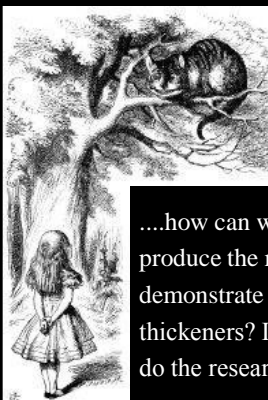
Calvin & Hobbes

Informed patient decisions



Shoulders of giants

- There is much “evidence”
- Good & bad
- Knowledge of things that don’t matter
- When do we say “enough?”



Alice: clinical researcher “I am curious....”

....how can we as nursing home SLTs produce the research we need to demonstrate the benefits of thin water vs thickeners? I think it’s important that WE do the research since we are right there.”

How.....

USA

UK

How.....

can some people drink a pint so darned fast?