ABSTRACT

TO FIND OUT THE PREVALENCE OF PHARYNGEAL PHASE SWALLOWING DISORDER USING FEES IN PATIENTS PRESENTING WITH DYSPHAGIA

Background and objective: Fibreoptic Endoscopic Evaluation of Swallowing (FEES) is now developing as a widely accepted method for instrumental assessment of swallowing. The usefulness of FEES to diagnose dysphagia and intervene in correction of dysphagia is gaining importance. In this study, we have studied the prevalence of swallowing disorder affecting the pharyngeal phase of swallowing is assessed using FEES. Also we have identified the parameters affected in different diseases and how the patients responded to swallowing manoeuvres.

Study Design: Prospective study

Methods: All patients underwent FEES examination using transnasal flexible fibreoptic nasopharyngoscope. Anatomy of the pharynx, and larynx assessed. Presence of oropharyngeal secretions, pooling and spontaneous swallowing was observed. Laryngeal adductor reflex was tested by touching the tip of the epiglottis. Then the patients were given teaspoon-sized portions of 3 different consistencies of food - Milk, ripe banana, and biscuit and swallowing assessed. The findings of FEES were recorded and evaluated as per the protocol given by ASHA (American speech and hearing association).
**Results:** Among the 78 patients with complaints of dysphagia, 53 of them had pharyngeal phase swallowing disorder as assessed by FEES. The prevalence was found to be 67.94%. 51% had pooled secretions. 41% had penetration and 43.4% had aspirations. 91.3% of them had an effective cough. Residue was seen in 79.2% patients. 86.8% had a normal laryngeal sensation. 56.7% of them improved with swallowing manoeuvres.

**Conclusion:** FEES is can not only be used as a screening procedure, but we can get a complete assessment of pharyngeal phase of swallowing and also aid in therapeutic interventions.

Key words: FEES, dysphagia, swallowing, endoscopic, pharyngeal phase, penetration, aspiration, pooling, residue