

# **Swallowing Problems**

Patients often experience swallowing problems, otherwise known as dysphagia, during and after treatment for head and neck cancer. Swallowing problems may persist or even worsen following completion of treatment. One reason for this is that scar tissue can form due to radiation and affect swallowing function. This can occur months or years after radiation.

# Some common swallowing complaints include:

- Food becoming caught in throat
- Coughing or clearing throat when eating or drinking
- Food or liquid going up nose or coming out of nose
- Jaw tightness
- Pain with swallowing
- Dry mouth
- Changes in taste
- Difficulty swallowing dry, fibrous foods, such as meat or bread
- Recurrent pneumonias, which is a sign that food or liquid is going into the lungs and causing infection

# What is aspiration?

Aspiration is a common complication associated with dysphagia resulting from weakness or reduced coordination of the swallowing muscles. Aspiration is the entry of material, such as food or liquids, into the airway below the level of the vocal cords. One sign of aspiration includes coughing and throat clearing during/after eating and drinking. Following head and neck cancer treatment, some people's bodies do not sense when material enters the airway. This is referred to as "silent aspiration," which means that food and liquid enter the airway without eliciting a cough. When someone aspirates food or liquid they are at risk for developing a serious condition known as aspiration pneumonia.

## When to get help

A swallowing evaluation may be helpful if you are currently undergoing or have completed treatment for head and neck cancer and have experienced changes in your swallowing, including difficulty swallowing pills, avoidance of certain foods due to fear of choking, or any of the complaints listed above.

#### How should I be evaluated?

If you have concerns about your swallowing, it is recommended that you discuss these concerns with your doctor. Your doctor can then refer you to the Speech and Swallowing Service for a clinical swallowing evaluation. A clinical swallowing evaluation will include a discussion about your complaints, an evaluation of your oral musculature, an assessment of your swallowing, and an introduction to pertinent swallowing exercises, dietary modifications, or compensatory strategies. Further treatment sessions are often indicated after the evaluation. If further testing is needed to determine these recommendations, then an X-ray of your swallowing, known as a "video swallow study," may be scheduled. You will then be referred to follow up with a Speech Pathologist.

At Dana-Farber, speech and swallowing services are provided after surgery or at the start of chemotherapy and radiation treatments. Our goal is to improve swallowing function after surgery, preserve swallowing function, and keep the patient swallowing safely during chemotherapy and radiation treatments. We provide education and exercises, as well as compensatory strategies and diet modification if needed.

After the patient has completed cancer treatment, he or she will often continue to work with the Speech Pathologist to improve their swallowing function. The goal is for the patient to safely upgrade their diet to the least restrictive diet.

## What can be done about dysphagia?

The best thing a patient who has had radiation can do is to continue with the swallowing exercises the Speech Pathologist has given you. We recommend doing those exercises for the rest of your life to preserve swallowing function and avoid the affect of fibrosis (scar tissue) on swallowing. Additionally, continuing to eat and drink is very important for maintaining swallowing function; therefore, it is important to work with your Speech Pathologist to determine the safest foods for you to consume.

## Treating and coping with symptoms

We recommend that you seek professional help if you are having trouble swallowing, but patients often find that these strategies can help ease swallowing problems after head and neck cancer treatment:

- Select soft, moist foods
- Use extra sauces/gravies
- Alternate between solids/liquids when eating
- Take small bites or sips
- Use over-the-counter saliva replacements to cope with dry mouth
- Sit upright when eating/drinking
- Allow extra time to eat

### Still have questions?

If you have questions or concerns regarding your swallowing function, ask your Dana-Farber oncologist to refer you to **Speech and Swallow Services** or call **617-632-6614**.

This document is for informational purposes only. The content is not intended as a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health care provider with any questions you may have regarding a medical condition.