

Swallowing Problems and the Older Adult¹

Wendy J. Dahl²



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Chewing

Chewing, known as mastication, is the process of breaking food down into smaller pieces to prepare it for swallowing.

Many older adults have problems with chewing their food due to missing or broken teeth, poor fitting dentures, or a sore mouth or toothache. Our tongues are needed to help move food around the mouth when we chew. Some older adults may have problems with tongue movement after a stroke, which can lead to problems with chewing.

During chewing, saliva is added to moisten and lubricate the pieces of food, and a **food bolus** or “ball” is formed. Saliva helps us taste our food and begins the digestion of starch. Saliva is also antibacterial and important to dental health.

Adding the right amount of saliva to a food is important for swallowing. Dry foods, such as bread, crackers, and cookies, require a lot of saliva incorporation. An older adult with a dry mouth, due to reduced saliva production, may have problems chewing and swallowing dry foods.

Causes of dry mouth include the following:

- side effects of some medications
- diseases such as diabetes and Parkinson’s disease
- nerve damage after injury to the head or neck
- radiation cancer treatment to the head or neck
- chemotherapy cancer treatment

Swallowing

Swallowing moves the food from the mouth to the esophagus and then down to the stomach. Many older adults have problems with swallowing.

Difficulties with keeping lips closed or controlling tongue movement, or a lack of feeling or sensation in the mouth, will interfere with swallowing. Older adults may also have problems with food getting stuck in the esophagus. Swallowing can be slow or uncontrolled. Swallowing problems are known as **dysphagia**.

Stroke is one of the most common causes of swallowing problems. Diseases such as Parkinson’s disease and Alzheimer’s disease often lead to swallowing problems. Head and neck cancer and some cancer treatments, as well

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2. Wendy J. Dahl, Ph.D., associate professor; Food Science and Human Nutrition Department; UF/IFAS Extension; Gainesville, FL 32611.

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as spinal cord and head injuries, also can cause swallowing problems. Some medications may also affect swallowing.

The common symptoms of swallowing problems include food sticking in the mouth or throat. Food or liquid may also come back up.

Some older adults may have problems communicating their symptoms. Caregivers can be on the lookout for signs of swallowing problems:

- coughing while eating
- gargling voice quality
- drooling while eating
- food pieces remaining in the cheeks or under the tongue
- very slow eating or swallowing

Many older adults with swallowing problems may become much more “picky” with respect to what foods they want to eat.

Why are we concerned about swallowing problems in older adults?

The most serious risk of swallowing problems is **aspiration**—when food or liquid gets into the airway or lungs. This can cause immediate choking and death if the airway is obstructed. Smaller amounts of food or liquid in the lung can lead to pneumonia.

Older adults with swallowing problems may begin to eat less. This may lead to dehydration and weight loss. As weight loss progresses, malnutrition may be the result.

Where can I get more information?

A swallowing problem may be a serious health issue. Older adults with signs and symptoms of swallowing problems should consult their doctor. Speech Language Pathologists are specially trained to assess and recommend treatment for swallowing problems. A Registered Dietitian (RD) can provide reliable information regarding foods and diets for older adults with swallowing problems.

Your local UF/IFAS Extension Family and Consumer Sciences (FCS) agent may have more information about food and nutrition for older adults and may have classes for you to attend.

Reference

Dahl, W. J. (2008). *Modified Texture Food Production: A Manual for Patient Care Facilities, 2nd Edition*. Dietitians of Canada.