

# Knowledge of Dysphagia, It's Screening among Nurses and Awareness of Role of Speech and Language Pathologist in Dysphagia

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## ABSTRACT:

**Background:** Dysphagia is a common complication with many structural, neurological and psychological problems. In hospital settings, in most cases nurses are the first health care professionals to come in contact with such patients. Knowledge of swallowing difficulties and the signs and symptoms is crucial for nurses working in such settings. A lack of knowledge of dysphagia signs and symptoms can result in detrimental consequences and this can be fatal for the patient.

**Objective:** The objective of the present study is to establish the knowledge of dysphagia and its screening among nurses and their awareness regarding role of speech and language pathologists in diagnoses and management of dysphagia in different hospitals of Rawalpindi and Lahore.

**Methods:** A non-experimental, descriptive survey design was selected for this research. Purposive convenient sampling technique was used. Eighty nurses were selected from four hospitals of Rawalpindi and Lahore. Nurses working in medical wards, neurological wards and ICU for two years were included in the study. A self-constructed 5 point Likert questionnaire was used as a research tool. The questionnaire consisted of 15 items.

**Results:** The results were analyzed using SPSS (Statistical Package for the Social Sciences). Findings indicate lack of knowledge of nurses regarding dysphagia.

**Conclusion:** It is concluded that nurses lack knowledge of dysphagia and its screening. As well as they don't have awareness of role speech and language pathologist in diagnosis and management of dysphagia.

**Keywords:** Dysphagia, Swallowing Difficulties, Nurses

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## **INTRODUCTION:**

Dysphagia is a common symptom of many medical conditions. Increased ratio of complaints associated with dysphagia necessitates timely screening and management of dysphagia. Speech and language pathologist (SLP) is a part of multidisciplinary team and plays vital role in early identification, assessment, diagnosis and management of dysphagia. Speech and language pathologists' role is essential for better care and improved quality of life of the patient. Speech and language pathologist will not only assess the patient but will also fabricate a management plan to improve hydration and nutrition of patient with dysphagia.

The exact prevalence of oropharyngeal dysphagia is unknown however; incidence of dysphagia is growing rapidly. Approximately ten million American are assessed with swallowing difficulties every year. Stroke is the most common cause of dysphagia (1). It is estimated that 22% of adults over 50 years of age, 61% of adults admitted to an acute trauma center, 50 to 75% of stroke patients and 60 to 70 percent of patients who undergo radiation therapy for head and neck cancer and 20-40% of patients with neurological diseases as Parkinson's Disease have dysphagia (2,3).

The speech and language pathologist (SLP) is the primary professional involved in assessment and management of individuals with swallowing disorders. The duties of speech and language pathologists include evaluation of swallowing, instrumental assessment of swallowing function in collaboration with medical specialist, identification of problem related to swallowing, measurements of these problems and referral to other professionals if required. The SLPs are trained in dysphagia and manage & treat patients along with documenting progress of patients and their plan for discharge. In addition, family/career guidance and educating other professionals regarding the needs of the individuals with swallowing disorders is also under the scope of speech-language pathologist (4, 5).

A research review on nurses' implication after stroke suggests that dysphagia is a common complication of stroke which infers need for increased understanding of post stroke dysphagia among nurses. Most of the time, food and medication are given to the patient in presence of nurses. They are more likely to observe dysphagia signs and symptoms. Nurses should be aware of factors such as positioning during eating or drinking, coughing or choking after eating or drinking, complaints of a feeling of obstruction, frequent throat clearing, unexplained temperature spikes, food avoidance, heartburn, change in respiration pattern after swallowing, and prolonged mealtimes. Knowledge of dysphagia enables nurses to identify the problem in time, refer the patient for diagnosis and intervention and follow the treatment plan accordingly. (6). A study was conducted to assess the accuracy of screening by trained nurses. The study suggested that nurses can carry out the initial screening only if they are trained. They can then refer the patient to the speech and language pathologist for further evaluation (7).

Nurses are more likely to miss or delay dysphagia referral to SLP due to lack of knowledge. Patient care is also affected by failure to follow management plan. In healthcare settings team approach is preferred while dealing with swallowing difficulties. Nurses are important unit of a team and their abilities do contribute maximum. However, untrained nurses will hinder team efficiency. An interdisciplinary approach and quick training of nurses to screen swallowing difficulties is recommended to handle dysphagia after an audit study in six hospitals. Trained nurses can screen the patient for presence/absence of swallowing difficulties and refer patient to

SLPs. A training program will improve the quality of services provided by interdisciplinary team. (8)

**BOX 1:INCLUSION CRITERIA:**

- Nurses working in ICU, neurological and medical wards
- Nurses dealing with patients with swallowing difficulties
- Nurses with a minimum of 2 years' experience of work in above stated areas

**METHODOLOGY:**

The purpose of this research study was to analyze the knowledge and understanding of dysphagia among nurses in four hospitals of Rawalpindi and Islamabad. A non-experimental, descriptive survey design was selected for the purpose of this research. Purposive convenient sampling technique was used. Nurses were selected on the basis of inclusion criteria explained in Box 1. The total sample size was eighty nurses out of whom 71 were female and 9 were male. Measures used in the study were demographic data sheet and a self-developed questionnaire. Questionnaire was a likert type scale and consisted of 15 items. Out of these 15 items, eleven items measured knowledge of dysphagia and its screening. Other 4 items were intended to check awareness of nurses regarding role of speech and language pathologist in dysphagia. Nurses were briefed about the questionnaire and were assured that the confidentiality of their identity will be maintained while processing the results. On basis of the collected data, a thorough analysis was conducted to establish the knowledge / awareness of nurses regarding Dysphagia and role of SLP.

**RESULTS:**

Of 80 nurses, 71(88.8%) were female and 9(11.2%) male. The professional experience of 73(91.2%) nurses was 2 to 8 years and 7(8.8%) nurses had experience of 9 to 15 years. The table 1 shows the frequencies and percentages of the scores obtained in dysphagia questionnaire. According to 50% cut off score, total scores were divided into lower and score ranges. Out of 80, 61(76.2%) participants scored between score range of 15 to 45 and 19 (23.8%) nurses scored between score range of 46-75. It shows that nurses lack knowledge regarding dysphagia.

TABLE

		Frequency	Percent
Valid	15-45	61	76.2
	46-75	19	23.8

Total	80	100.0
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Figure 1 shows lack of knowledge of nurses regarding dysphagia and its screening as 56(70%) participants scored in lower range and 24(30%) participants scored in higher range on items of knowledge/screening of dysphagia indicating.

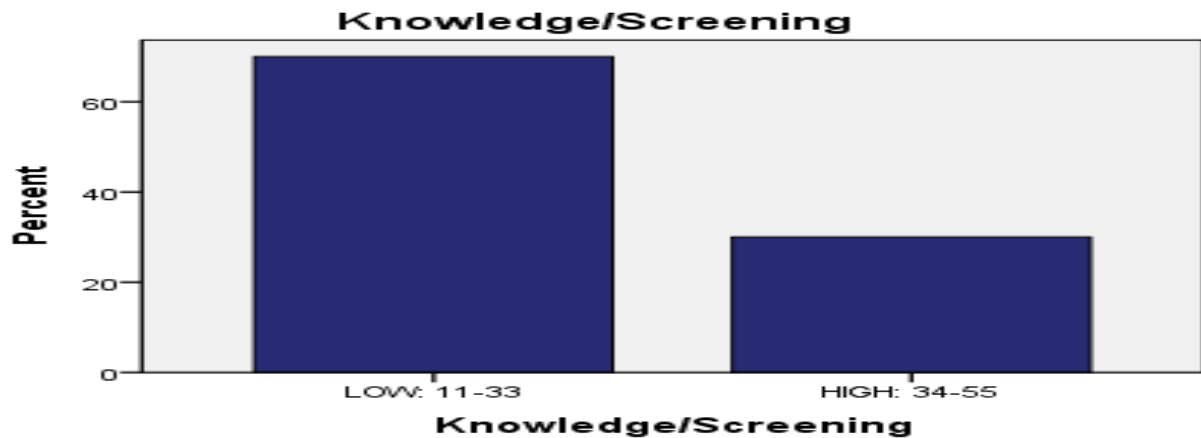
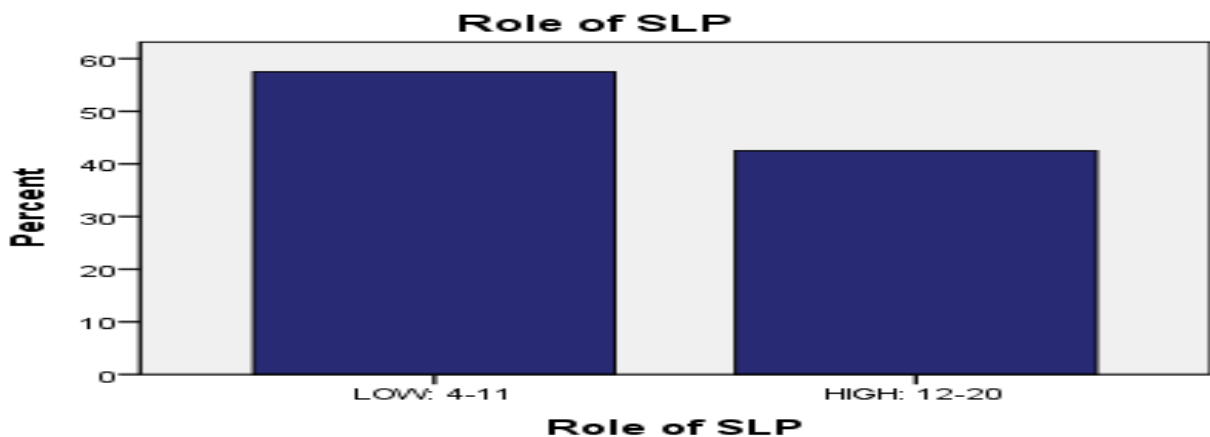


Figure 1: Percentages of score of items on role of SLP in dysphagia in figure 2 shows that there are more participants in lower score range. Out of 80 participants, 57.5% (46) fall in lower score range and 42.5% (34) fall in higher score range.

Figure 2



## DISCUSSION

Dysphagia is an extremely serious medical problem in which patients' life is under severe threat. Initial identification is recommended in dysphagia to prevent complications. Nurses can play an important role in identification of dysphagia if they have clear knowledge/training about the condition. Results of this study indicated that nurses do not have adequate knowledge of dysphagia, its screening and role of speech and language pathologist. Sample of this study was consisted of nurses who are working in ICU, medical wards and neurological wards. It is more common to see patients with swallowing difficulties in these wards. Nurses need to observe sign and symptoms of at risk patients to identify dysphagia. Understanding and knowledge of dysphagia is a prerequisite when working in setting where influx of dysphagia patient is high.

Results of this research are endorsed by a study carried out to check knowledge of certified nurses regarding dysphagia which also concluded lack of knowledge among nurses (9).

Lower score on knowledge/screening items in the present study indicated that nurses are handling dysphagia without correct knowledge of the condition. These results highlighted the fact that there are a number of patients who are at risk of developing complications due to poor knowledge of dysphagia and its screening among nurses. A study on predictors of aspiration pneumonia indicated that dysphagia, if not identified timely, might result in aspiration pneumonia (10). Nurses have an important role in reducing adverse outcomes associated with dysphagia if they do dysphagia screening in critical time. Proper screening of a patient is important to observe the signs of swallowing difficulties and will not replace the detailed assessment by SLP.

This study indicated that nurses lack knowledge about role of speech and language pathologist which is an obstacle in creation of an ideal interdisciplinary team.. A study on prevalence, assessment and management of dysphagia emphasized the need for nurses to work in collaboration with speech and language pathologist (11).

## **CONCLUSION**

This research focused on the nursing staff manifest lack in the knowledge regarding dysphagia. Which would then hamper the subsequent phases of screening of patients according to their symptoms and proper management. It is thus concluded that nurses lack knowledge of dysphagia and its screening. As well as they don't have awareness of role speech and language pathologist in dysphagia.

## **LIMITATIONS**

Limitation to the present study is small sample size of the study. The sample was collected from only four hospitals of two cities of Pakistan.

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