

ADULT SPEECH PATHOLOGY

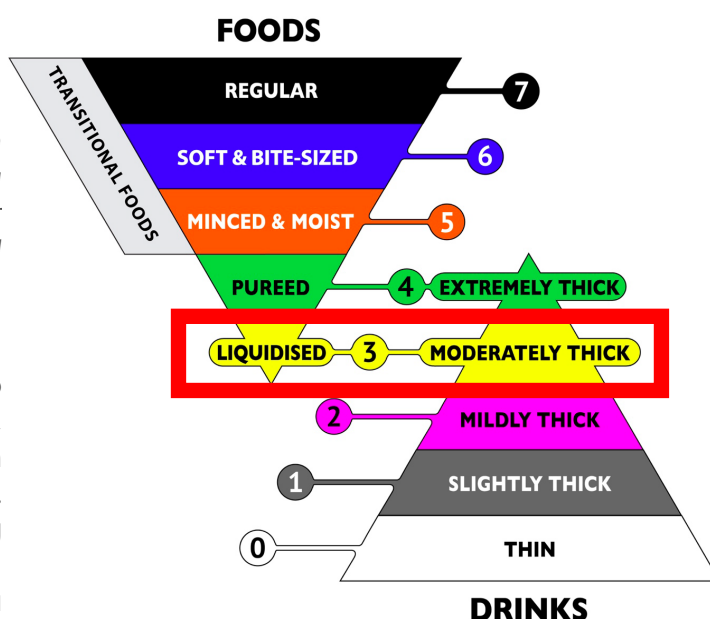
LIQUIDISED MODERATELY THICK

There is **no** change to Liquidised diet and Moderately thick fluids. Yellow: level 3 Moderately Thick fluid level, but a new 'foods' level has been added- **Liquidised food**.

Liquidised food and moderately thick fluids both have the same flow characteristics & testing methods. They may be recommended for someone with reduced tongue control &/or oral preparation, and severe difficulty &/or pain swallowing some consistencies.

Food in a Liquidised diet is **smooth** (i.e with no 'bits' like lumps, fibres, bits of shell or skin, husk, seeds). It can be drunk from a cup or eaten from a spoon. An example is runny pureed fruit. It should easily pour from a tilted spoon, having some flow, but no separation of thin (watery) liquid. It should not be able to be eaten from a fork or chop sticks, and it will not hold its shape on a plate.

(For foods like soup at Level 3 Liquidised texture, IDDSI suggests blending with milk, butter, cream or gravy to avoid diluting nutrient and energy content. Consult a dietitian for more information.)



Testing if a food/drink is

Testing methods:

- **Fork Drip Test** (shown)
- **IDDSI Flow Test**

(Flow test to be described in the next newsletter.)



Drips slowly or in dollops/strands through the slots of a fork

NOTE: All thickened fluids and foods must be referred to by at least two identifiers (colour & name/ name & number / number & colour) **E.g. Moderately thick or Liquidised, Level 3, Yellow**

RISKS OF ASPIRATION

What is aspiration?

Aspiration occurs when foreign bodies such as food or fluids “go down the wrong way”, enter the airway and pass beyond the vocal folds towards the lungs.

People with dysphagia are at a greater risk of aspiration. Individuals can also aspirate their own secretions and reflux.

Why is aspiration dangerous?

- It increases the risk of contracting aspiration pneumonia.
- It increases the risk of obstructing the airway/choking.
- It can cause damage to the airway/lungs.

What is Aspiration Pneumonia?

(from ‘How to predict and prevent aspiration pneumonia in patients with dysphagia’ by Susan Langmore, SPA conference 18/5/14)

This is a form of bacterial pneumonia, and a common complication of dysphagia. It requires pathogenic bacteria to be aspirated into the lung as soluble particles or attached to surfaces e.g. with food, oral secretions, liquid or stomach contents (i.e. not airborne).

How does an aspiration pneumonia develop?

- It may occur 2-3 days after a significant aspiration event.
- It may also occur when chronic aspiration of small amounts reaches a critical threshold where the bacteria takes hold. (*Individuals may tolerate some level of aspiration without developing a pneumonia.)

Preventing aspiration pneumonia is complex, but it includes understanding what alters an individual's bacterial flora to make it pathogenic and also understanding an individual's ability to resist bacterial invasion. **However, reducing aspiration itself (i.e. managing any dysphagia) remains a clear goal.**

How do we reduce this risk?

Consult a speech pathologist for an assessment to identify the contributing factors and risks for each individual. The speech pathologist can work with facility staff and families to develop a management plan, for example by suggesting diet or fluid modification, or specific safe feeding strategies.



NUTRITION IN A LIQUIDISED DIET



It is important that fluids be as nourishing as possible to provide all the nutrients required for the best overall quality of life. A liquidised diet can be low in many vitamins and minerals, fibre, iron and energy (kilojoules or calories). A multivitamin and an iron supplement may be needed. For example:

- Multivitamin: Supradyn (soluble) one per day
- Iron supplement: Iron Melts or a liquid iron supplement once or twice per week

Your dietitian will advise about the specific quantities of the various nourishing fluids needed. Weight should be monitored closely.

The liquidised food is also providing fluid- it is important to maintain an adequate overall fluid intake.

It is difficult to obtain sufficient fibre, and constipation may become a problem. Ensuring soups are rich in vegetables will help, as will ensuring adequate amounts of fluid daily. Including prune juice with breakfast is one way to help prevent constipation as well as exercise if it can be managed.

Benefibre is a soluble fibre supplement and can be mixed into hot and cold beverages to help improve fibre intake. It is tasteless and colourless and dissolves well unlike some fibre supplements which may form lumps. Follow the directions on the packet.

IMPROVING NUTRITION IN 2019

We have set the dates for the 2019 Improving Nutrition 2 day seminars. See the NPA website for more details and for the dates in your region.

This year we will be focusing on IDDSI and the new standards.



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This newsletter is a joint collaboration between Adult Speech Pathology and Nutrition Professionals Australia.