The Prevalence and Signs of Dysphagia Among Stroke Patients in Rehabilitation Units

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Abstract

Background: Dysphagia, a very common post-stroke symptom, has been linked to aspiration pneumonia, malnutrition, and increased length of hospitalization. While patients are typically monitored for dysphagia continuously following their transfer to a rehabilitation unit, little is known about the results of dysphagia reassessments.

Purpose: This study investigates the prevalence and signs of dysphagia among stroke patients in rehabilitation units.

Methods: We analyzed patients with stroke admitted to a rehabilitation unit of a medical center in southern Taiwan. The procedure included chart review, the repetitive saliva swallowing test (RSST), and the modified water swallowing test (MWST). Dysphagia was defined as either RSST or MWST abnormal. JMP 9.0 was used to perform descriptive statistics, t-test, chi-square test and logistic regression analysis.

Results: At clinical examination, 53.61% of the study subjects demonstrated dysphagia. Chi-square analysis showed that five abnormal signs (could not close mouth with water, without mastication, food stuck in the throat, obvious sputum sound, and choking after swallowing) are all associated with dysphagia. Multiple logistic regression analysis revealed choking is a significant predictor variable of dysphagia.

Conclusion: Over half of the rehabilitation unit stroke patients in this study had dysphagia. Nurses are the primary care providers for dysphagia patients. Therefore, there is a need for ward nurses to have skills to assess, recognize, and manage dysphagia and to enhance patient safety.

Key Words: stroke, dysphagia, repetitive saliva swallowing test (RSST), modified water swallowing test (MWST).