

eNewsLetter





Resources for nutritional management of patients with COVID-19



Since 31 December 2019 and as of 14 December 2020, there have been over 71 million reported cases of COVID-19 worldwide¹. **Oropharyngeal dysphagia** (OD) is a **common complication** in COVID-19, either directly

due to the trauma of intubation or secondary to respiratory damage, neurological and cognitive deficits, deconditioning, or critical illness myopathy and neuropathy.²⁻⁴ OD leads to some significant medical consequences. Up to **73%** of patients present

nutritional risk (NRS2002>3) at admission and 37.7% develop malnutrition during hospitalisation, according to GLIM criteria, with a mean weight loss of 9.35 ± 6.03 Kg.5 Up to 43.7% of patients need thickeners to be safely hydrated and 54.5% have impaired mastication and need texture-modified diets. In the acute and post-acute phases, 70% of

Mortality rate is present in 9.32% of these patients with oropharyngeal dysphagia and malnutrition.5

patients with severe OD are fully or partially dependent on tube feeding.

It is necessary to use uniform, reliable protocols to identify and ameliorate dysphagia in COVID-19 patients.





AIM

This issue offers some relevant articles on COVID-19 and dysphagia published in the last months.

ESSD COMMENTARY ON DYSPHAGIA MANAGEMENT DURING COVID PANDEMIC

RELEVANT PUBLICATIONS ON COVID-19 AND DYSPHAGIA



Speyer R, Walshe M, Verin M, Rommel N.

The European Society for Swallowing Disorders (ESSD) provides some recommendations during the COVID-19

Dysphagia. 2020 Oct 27;1-4. doi: 10.1007/s00455-020-10194-z.

Schindler A, Baijens L, Clave P, Degen B, Duchac S, Dziewas R, Farneti D, Hamdy S, Michou E, Pokieser P,

pandemic based on the literature available and preliminary clinical experience of European dysphagia experts within the ESSD, considering different perspectives from different countries. Five questions are addressed in this paper: 1) When should patients suspected of dysphagia be assessed? 2) How should patients suspected of having dysphagia be assessed? 3) When should instrumental swallowing assessment be performed? 4) How is the expert in swallowing disorders protected? 5) How is dysphagia treated during the COVID pandemic? **See Publication**



RESEARCH SOCIETY TASKFORCE REPORT OF SERVICE-DELIVERY DURING THE COVID-19 **GLOBAL PANDEMIC** Miles A, Connor NP, Desai RV, Jadcherla S, Allen J, Brodsky M. Dysphagia 2020;1-13. doi: 10.1007/s00455-020-10153-8.

DYSPHAGIA CARE ACROSS THE CONTINUUM: A MULTIDISCIPLINARY DYSPHAGIA

This document summarises the current understanding of dysphagia in patients with COVID-19 and provides recommendations for healthcare professionals to protect themselves while conducting swallowing assessments

and therapeutic procedures. It includes a review of multidisciplinary dysphagia care activities that can be conducted with physical distancing and via telehealth. **See Publication**



SOCIETY OF SWALLOWING AND DYSPHAGIA OF JAPAN: POSITION STATEMENT ON DYSPHAGIA MANAGEMENT DURING THE COVID-19 OUTBREAK

Auris Nasus Larynx 2020;47(5):715-726.

oral care, nursing care and surgical treatments.

Dysphagia 2020;1-9. doi: 10.1007/s00455-020-10144-9.

Azzolino D, Passarelli PC, D'Addona A, Cesari M.

This position statement provides information and advice on managing dysphagia during the COVID-19 outbreak,

including "clinical swallowing assessment and examination", "dysphagia rehabilitation", "oral care", "nursing care", "surgical procedure for dysphagia" and "tracheotomy care". Dysphagia treatment includes a broad range of clinical assessments and examinations, dysphagia rehabilitation,

Kimura Y, Ueha R, Furukawa T, Oshima F, Fujitani J, Nakajima J, et al.

See Publication

The current set of statements on dysphagia management in the COVID-19 outbreak is a guide for all healthcare workers involved in the treatment of dysphagia during the COVID-19 epidemic to prevent SARS-CoV-2 infection.



COVID-19 PANDEMIC AND BEYOND Fritz AM, Howell RJ, Brodsky MB, Suiter DM, Dhar SI, Rameau A, Richard T, Skelley M, Ashford JR, O'Rourke AK, Kuhn MA.

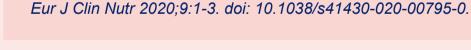
swallowing disorders.

The objective of this review was to create a clinical algorithm and reference for dysphagia clinicians across clinical

settings to minimise the spread of COVID-19 cases while providing optimal care to patients suffering from

NUTRITIONAL STRATEGIES FOR THE REHABILITATION OF COVID-19 PATIENTS

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COVID-19.

The authors present a three-step process for the diagnosis of swallowing disorders, three-step protocol for screening and nutritional intervention at admission and during hospital stay, and a rehabilitation plan post

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PANDEMIC

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• Diagnosis of swallowing disorders: 1.-Screening such as EAT-10; 2.-Clinical Assessment; 3.-Instrumental assessment. • Nutritional intervention: 1.-Dietary counselling and/or food modification; 2.-EAA supplementation and/or oral

dysphagia product; 3.-Enteral (EN) or parenteral (PN) nutrition if needed.



This article provides guidance on outpatient, hospital management, and follow-up of patients with COVID-19, based on the recommendations issued by the Pan American Health Organization (PAHO) and from associations

Escalante-Ornelas AP, Herrera-Bandín AS, Gutiérrez-Canencia U, Paola Alatriste-Cequera JP,

Martínez-Sánchez L, Pérez-Alba, Yáñez-Cabrera MF, Hernández-Camacho MA. Journal of Audiology, Otoneurology & Phoniatrics 2020;2:1-14.

AEROSOL GENERATING PROCEDURES, DYSPHAGIA ASSESSMENT AND COVID-19: A RAPID **REVIEW**

Int J Lang Commun Disord 2020;10.1111/1460-6984.12544. doi: 10.1111/1460-6984.12544.

dysphagia assessment, and risk of COVID-19 transmission and infection in response to urgent clinical information needs.

The COVID-19 Advisory Group of the Royal College of Speech and Language Therapists (RCSLT) aimed to review the evidence underpinning the current healthcare policies in relation to aerosol-generating procedures (AGPs),

dedicated to the study and treatment of dysphagia.

Bolton L, Mills C, Wallace S, Brady MC.

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Frajkova Z, Tedla M, Tedlova E, Suchankova M, Geneid A. Dysphagia 2020;35(4):549-57. doi: 10.1007/s00455-020-10139-6.

See Publication

The aim of this review is to summarise available information and recommendations on the diagnosis and



REFERENCES

1. COVID-19 situation updates worldwide, as of 14 December 2020. [Accessed 15 December 2020]. Available at https://www.ecdc.europa.eu/en/geographical-distribution-2019-ncov-cases

management of post-intubation dysphagia in the COVID-19 patients.

2. Schindler A, et al. ESSD commentary on dysphagia management during COVID pandemic [Internet]. European Society for Swallowing Disorders [Accessed October https://irp-cdn.multiscreensite.com/9a58e4f8/files/uploaded/ESSD%20commentary%20on%20dysphagia%20management%20during%20COVID%20pandemia_final3.pdf

POST-INTUBATION DYSPHAGIA DURING COVID-19 OUTBREAK - CONTEMPORARY REVIEW

- 3. Dysphagia Guidance & COVID 19 [Internet]. Buckinghamshire Healthcare NHS [Accessed October 2020]. Available at: $https://www.buckshealthcare.nhs.uk/Downloads/AA_COVID_19/Dysphagia\%20Guidance\%20for\%20COVID\%2019.pdf.$ 4. Miles A, et al. Dysphagia care across the continuum: a multidisciplinary dysphagia research society taskforce report of service-delivery during the COVID-19 global pandemic. Dysphagia 2020;1-13. Doi: 10.1007/s00455-020-10153-8
- 5. Martín A, et al. Prevalence of oropharyngeal dysphagia and malnutrition in patients with Covid-19 at a general hospital during spring 2020 pandemics. 10th ESSD Online Virtual Congress 2020. Dysphagia Management across Lifespan-A New State-of-the Art post COVID-19? 6. Kalf J.G., et al. Severity Profiles of dysphagia after COVID-19 from acute to post-acute phase. 10th ESSD Online Virtual Congress 2020. Dysphagia Management across Lifespan-A New State-of-the Art post COVID-19?

