



Supporting infants, children and young people with feeding and swallowing difficulties

peech and language therapists play an important role in evaluating and supporting infants, children and young people who have feeding and swallowing difficulties (dysphagia). They may have:

- problems with sucking, chewing or swallowing effectively and safely:
- difficulties developing their feeding skills;
- read a particular taste, texture or method of feeding;
- behavioural difficulties associated with eating, drinking and mealtimes.

A serious issue

Difficulties with swallowing can cause chest infections, pneumonia, choking, dehydration, malnutrition and weight loss, all of which can impact on a child's health and quality of life.

Feeding difficulties can be particularly stressful for parents and carers as they can have a negative impact on communication and interaction that typically occurs during mealtimes. They can make eating unenjoyable and disrupt families and their parenting roles. Parents report that they often feel isolated, as a significant amount of time during the day can be spent feeding a child with these problems.





Simon's story

After Simon was born he had difficulties with his breathing and muscle control, making swallowing milk difficult. When he was discharged from hospital, he was fed through a tube that went from his nose to his stomach. Simon's mother was worried about whether he would be able to feed via his mouth in the future. He was supported by a speech and language therapist who worked with his family to position him safely for eating and drinking, and provided advice on how to recognise when he was struggling to swallow and how to help him. Simon began by having small amounts of milk from a bottle, which were gradually increased, supported by the techniques and strategies provided by his speech and language therapist. Simon is now nine months old and enjoys drinking milk and eating a range of purees. He no longer needs a tube and his family are delighted with his progress.

What support is available?

Speech and language therapists can assess and identify possible causes of eating and drinking difficulties. During feeding and mealtime observations they will be able to assess the nature of the difficulties. They may request specialist assessments such as a videofluoroscopy swallow study to help to understand the problem. They can support parents and carers in using strategies to help infants, children or young people to manage their mealtimes as safely as possible. They may also suggest different feeding equipment, texture changes, positions or techniques to help make eating and drinking easier and safer.

Speech and language therapists work in hospital and community settings, collaborating with other members of the multidisciplinary team, including doctors, nurses, dietitians, physiotherapists, occupational therapists, clinical psychologists, community nurses, paid carers and education professionals.



The size of the problem

Infants, children and young people with neurodisability and those born prematurely are most likely to be at risk of dysphagia, but feeding difficulties also occur in typically developing children. Recent research has found the incidence of feeding difficulties is:

- between 25% and 45% in a typically developing paediatric population¹
- ▶ between **31%** and **99%** for children with cerebral palsy^{2,3,4,5,6}
- between 21% and 44% for children with general neurodevelopmental disabilities^{7, 8, 9, 10, 11}
- ▶ between **26.8%** and **40%** of infants born prematurely^{12, 13}
- between 68% and 72% of children with acquired conditions during the acute phase of care^{14, 15}

For more information, email: info@rcslt.org

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