

Post-stroke dysphagia

A way to **reduce the incidence of aspiration** in patients who have suffered a stroke, do not immediately require mechanical ventilation, and have swallowing dysfunction.

Must-have

< 35% incidence of aspiration post-treatment¹

Immediate therapeutic effect lasting up to 1 month²

Cost < \$4,677 per dysphagia patient or < \$70 per dysphagia patient per percent reduction in aspiration pneumonia^{3, 4, 5}

MRI Compatible

Nice-to-have

< 14% incidence of aspiration pneumonia post-treatment⁴

Immediate therapeutic effect lasting up to 6 months²

Cost < \$2,632 per dysphagia patient⁶

Patient able to consume non-restricted diet

1. Evidence-Based Review of Stroke Rehabilitation. Chapter 15: Dysphagia and Aspiration Following Stroke; available at: http://www.ebsr.com/sites/default/files/Chapter15_Dysphagia_FINAL_16ed.pdf
2. Robbins, J., Kays, S. A., Gangnon, R. E., Hind, J. A., Hewitt, A. L., Gentry, L. R., & Taylor, A. J. (2007). The effects of lingual exercise in stroke patients with dysphagia. *Archives of Physical Medicine and Rehabilitation*, 88(2), 150–8. doi:10.1016/j.apmr.2006.11.002
3. Martino, R., Foley, N., Bhogal, S., Diamant, N., Speechley, M., & Teasell, R. (2005). Dysphagia after stroke: incidence, diagnosis, and pulmonary complications. *Stroke; a Journal of Cerebral Circulation*, 36(12), 2756–63. doi:10.1161/01.STR.0000190056.76543.eb
4. <http://www.strokecenter.org/patients/about-stroke/stroke-statistics/>
5. Wilson, R. D. (2012). Mortality and cost of pneumonia after stroke for different risk groups. *Journal of Stroke and Cerebrovascular Diseases : The Official Journal of National Stroke Association*, 21(1), 61–7. doi:10.1016/j.jstrokecerebrovasdis.2010.05.002
6. Bonilha, H. S., Simpson, A. N., Ellis, C., Mauldin, P., Martin-Harris, B., & Simpson, K. (2014). The one-year attributable cost of post-stroke dysphagia. *Dysphagia*, 29(5), 545–52. doi:10.1007/s00455-014-9543-8