



Dysphagia Evaluation

(a) Introduction

The term “dysphagia” refers to the feeling of difficulty swallowing food or liquid. Dysphagia is a symptom of a potential problem in swallowing, but it is not a diagnosis itself (for example, “knee pain” is a symptom, and “torn ACL” is a diagnosis that causes the symptom of knee pain). Difficulty swallowing may be caused by many factors, most of which are temporary and not threatening. Difficulties in swallowing rarely represent a more serious disease, such as a tumor or a neurological disorder. It can happen to people of all ages, but it is more common in the elderly. When the difficulty does not clear up by itself in a short period of time, you should see an otolaryngologist-head and neck surgeon.

(b) Technology or Method

Typical instrumental swallow tests include fiberoptic endoscopic evaluation of swallowing (FEES) and video-fluoroscopic evaluation of swallowing (VFSS, also referred to as a modified barium swallow study, MBSS or MBS).

FEES is typically performed in the office. A flexible scope is passed through the nose, which allows your provider to see inside your throat. While watching your throat, you will be given different things to eat and drink. These food items are marked with food coloring to make it easier to see where the food goes during the test. The provider will watch you swallow and make note of anything that causes difficulty. The scope is then removed, and the results of this test can then be shared with you.

VFSS is similar to FEES except that it is typically performed in the Radiology Department of a hospital, usually by a speech pathologist. Instead of a scope in the nose, the provider will take X-rays to watch you swallow. Instead of food coloring, a white paste (made from a substance called barium) is used to coat the different food items so that they show up on the X-ray. The provider will watch you swallow and make note of anything that causes difficulty. The results of this test can then be shared with you by the speech pathologist.

(c) Interpretation or Pertinent Findings

The clinician performing the swallow test (FEES or VFSS) will look to see if there is any food or liquid material that gets stuck anywhere in your throat. S/he will also look to see if anything goes the “wrong way,” meaning into your wind pipe instead of your food pipe.

Based on what is seen during the exam, your provider may make suggestions as to what you eat or how you eat.

You may also be recommended to undergo other tests, swallow therapy, and/or surgery to help address your swallowing problem.

References

Harounian J, Jamal N. “Dysphagia.” In: Laryngology Clinical Reference Guide. Eds., Sataloff RT, Hawkshaw M, Panossian H, Ross J. Plural Publishing: In press. This chapter summarizes the causes of difficult swallowing and how these causes can be evaluated and treated.



Langmore SE, Schatz K, Olson N. Endoscopic and videofluoroscopic evaluations of swallowing and aspiration. *Ann Otol Rhinol Laryngol.* 1991;100(8):678-81. This is a study that compares FEES with VFSS and found both tests to be useful in the evaluation of patients with swallowing difficulties.