

Community Guide to Prescribing Thickeners for Dysphagia in Adults

The Speech and Language Therapy (SLT) team may recommend modifying the consistency of food and drinks to help make swallowing safer for people with swallowing difficulties. This may include recommending thickened fluids accompanies by a request for prescription of thickener.

The Royal College of Speech and Language Therapists (RCSLT) have published a <u>position</u> <u>paper</u> on the use of thickened fluids in 2024. Thickened fluids can reduce the risk of laryngeal aspiration, and reduce distressing coughing when drinking, but the overall evidence to date is unable to conclude definitively that thickened fluids can prevent or reduce dysphagia-related complications such as aspiration pneumonia, dehydration or death, or that they improve quality of life. There are potential adverse effects from thickened fluids of thirst, dehydration, reduced quality of life, impaired bioavailability of certain medications, altered bowel habits and increased risk of respiratory tract infections if thickened fluids are aspirated.

Therefore, **all people with swallowing difficulties** where thickened fluids are being considered, including prescription changes, **must be referred for assessment by SLT who can give patient specific advice.**

Clinicians are encouraged to use their clinical judgement of the degree of risk of aspiration and the potential consequences on an individual patient basis. For some individuals it may be appropriate to trial the use of thickener while awaiting SLT assessment.

Safe eating/drinking/swallowing techniques to support patients prior to SLT assessment:

- Make sure the person is awake and alert when eating and drinking
- Ensure hearing aids and glasses are worn so the person so hear prompts and see the food and drinks
- Make sure the person is sitting as upright as possible when eating and drinking, with head straight and chin level or lightly down. Uses cushions or pillows for support if needed.
- To reduce the risk of reflux the person should remain semi-upright for at least 30 minutes after eating and drinking.
- Give all food and drink in a quiet room free of distraction (TV/radio off).
- Don't talk to the person while they have food or drink in their mouth, wait for them to clear their mouth before talking. Be comfortable with silence.
- People supporting with eating and drinking should sit at the same level or lower than the person being supported and make eye contact.
- Encourage the person to feed themselves wherever possible or use hand over hand feeding.
- Tell the person what the food and drink is and make sure they can see their food. Food should look and smell appetising, try to avoid mixing foods unnecessarily.
- Remind the person to chew and swallow (say "swallow" or gently touch their mouth or face)
- Make sure people have swallowed one mouthful and cleared their mouth before having the next mouthful. Allow time for a second "clearing" swallow if needed.
- Give small mouthfuls using a teaspoon
- Offer sips of drink between food
- Use an open or cutaway cup spouts and straws increase the risk of aspiration for people with swallowing difficulties
- Eating and drinking safely may take a long time, so make sure sufficient time is allowed for meals and drinks. If food and drinks go cold try using insulated ups or plates or heat several smaller servings

Which Thickener to Prescribe

Patients should be prescribed a "clear" thickener, unless otherwise specified by SLT. There are two preferred thickener products in Surrey Heartlands: Nutilis Clear[®] and Resource ThickenUp Clear[®].

Thickener choice should reflect the thickener choice in the local acute hospital (see below).

How Much Thickener to Prescribe

The amount of thickener required each month will vary depending on the identified IDDSI level suitable for the patient. Adults should be encouraged to drink at least 1600mL fluid per day, (although this can vary depending on age, gender and weight). The amounts of thickener advised in the table below are the minimum quantities required for 28 days to thicken 1600mL fluid per day to the correct consistency. Scoops per 200ml are based on thickening water, other drinks may need more or less thickener powder following product instructions.

Thickener	Presentation	IDDSI level	No. of scoops per 200ml fluid*	Amount required per 28 days for 1600ml fluid per day (number of tins / total grams)
Nutilis Clear	175g tin	Level 1	1	2 / 350g
		Level 2	2	3 / 525g
		Level 3	3	5 / 875g
		Level 4	7	11 / 1925g

Nutilis Clear is the formulary thickener in Ashford and St Peters, Epsom and St Hellier and Royal Surrey Hospitals

Resource ThickenUp Clear*	215g tin	Level 1	1	2 x127g tin/254g →	1 x 215g tin#
		Level 2	2	4 x127g tin/508g →	3 x 215g tin/ 645g
		Level 3	4	9 x127g tin/1143g →	5 x 215g tin/ 1075g
		Level 4	6	13 x127g tin/1524g →	8 x 215g tin/ 1720g

Resource ThickenUp Clear is the formulary thickener in East Surrey, Frimley Park and Kingston Hospitals ***Tin size changing from 127g tin to 215g tin from February 2025. Prescription volumes will require updating**

*Patients with fluid intake more than 1600ml per day may require 2 tins (430g) per month

Medications

Review medications to ensure they are suitable. Liquid formulations may not always be appropriate (especially if they are thin fluids). Consider review of medicines by a pharmacist to review medication indication, alternative formulations or other routes of administration and seek advice from manufacturers or hospital medicine information services as required. Thickener products can affect the absorption and bioavailability of oral medications. <u>Advice</u> has been issued advising of an interaction between polyethylene glycol laxatives and starch-based thickeners.

Note: thickeners are not licensed for mixing with medications (this is an off-label use of the medication), so decisions on medication administration should be on an individual patient basis and clearly documented (e.g. in prescription directions). Specialist Pharmacy Service provide resources giving advice, including:

- <u>Choosing medicines formulations in</u> <u>swallowing difficulties</u>,
- <u>Checking if tablets can be crushed or</u> <u>capsules opened</u>,
- <u>Checking if medicines can be given with</u> <u>food</u>,
- Why and how medicines are given with soft food or thickened fluid.
- Advising how to crush or disperse tablets
 and open capsules
- Thickeners and thickened fluids
- <u>Thickening liquid medication</u>

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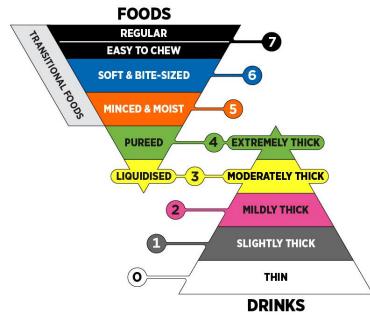
Key Recommendations

 * Avoid prescribing thickeners in sachets, prescribe tins and check prescribing volume when selecting product. * Store thickeners safely and out of reach to avoid accidental ingestion (see <u>patient safety alert</u>). * Avoid prescription of pre-thickened drinks (e.g., Slo-drinks, Fresubin Thickened, Nutilis Complete) unless recommended by a dietitian or SLT. * Remove previous thickener prescriptions on receipt of a new prescription request'. 							
Additional Key Recommendations for Care Homes							
Thickener stock in care homes should not be automatically disposed of each month, stock should be carried forward and additional stock requested as required.							

International Dysphagia Diet Standardisation Initiative (IDDSI) framework

refer to the guidance on the PAD for further information.

A set of <u>detailed definitions</u> has been developed to standardised global terminology and definitions for thickened liquids and texture modified foods used by patients of all ages and in all care settings with dysphagia. The final dysphagia diet framework consists of a continuum of 8 levels and is used in all care settings in the UK. <u>Printable patient information</u> is available.



© The International Dysphagia Diet Standardisation Initiative 2019 @ https://iddsi.org/framework/ Licensed under the CreativeCommons Attribution Sharealike 4.0 License https://creativecommons.org/licenses/by-sa/4.0/legalcode. Derivative works extending beyond language translation are NOT PERMITED.

If an individual experiences any of the following issues, please contact SLT for review and advice:

- Choking, excessive throat clearing or regular coughing when eating, drinking or swallowing
- Voice regularly sounding wet or 'gurgly' when eating, drinking or swallowing
- Recurrent chest infections
- Gasping for breath when eating, drinking or swallowing
- Change of colour in the face when eating, drinking or swallowing

Any of these signs at other times may suggest other aspiration related issues and should also be referred to SLT for assessment.