



Dysphagia



KAPITEX[®]
Airway Intelligence



Certified Quality Products

Our products meet the requirements of the most demanding applications and comply with all relevant national and international guidelines and standards. They are registered and approved in many countries world-wide.

Product descriptions

Please note that due to continuous product developments it may be necessary to alter, without notice, products within our range. We endeavour to keep all customers informed of product improvements. Purchased products may differ in appearance from the illustrations shown in this brochure.

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What is Dysphagia?

Dysphagia is the medical term used to describe swallowing problems. It is caused by any medical condition which affects the structure, strength and co-ordination of chewing and swallowing muscles.

This might be due to stroke, Parkinson's disease, dementia, neurological conditions and mouth or oesophageal cancer. Dysphagia is also common in children or adults with developmental or learning disability. ⁽¹⁾

Dysphagia can cause many problems including: ^(2,3)

- Dehydration
- Poor nutrition and weight loss
- Coughing/choking episodes
- Limited enjoyment of food
- Anxiety at meal times
- Isolation from social activity where food is involved
- Chest infections from inhaled food or liquid

How do I recognise dysphagia?

If you or anyone you know has signs of the following they may be having difficulty with swallowing: ⁽⁴⁾

- 1) Coughing or clearing the throat at meal times.
- 2) Food residue left in the mouth after a swallow.
- 3) Difficulty chewing or moving food around the mouth.
- 4) Loss of liquid from the mouth when drinking.
- 5) Difficulty holding food in the mouth or initiating a swallow.
- 6) Wet or gurgling voice after eating or drinking.

Dysphagia is a serious medical condition for which you must seek advice from a suitable medical practitioner.

Normal Swallowing

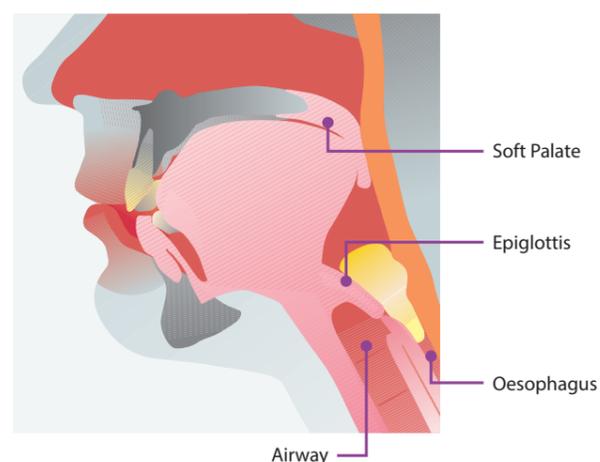
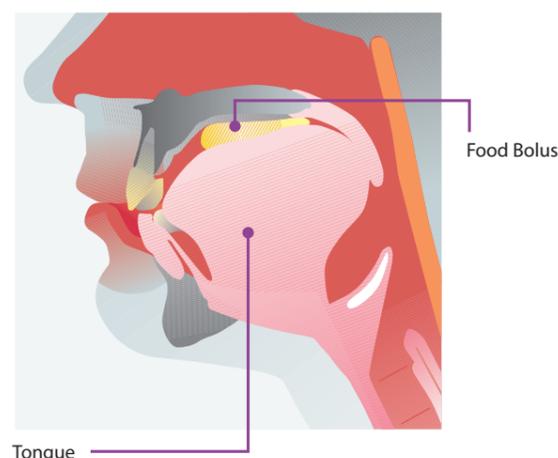
The normal swallow has four phases:

1) Oral Preparatory:

Food is taken into the mouth and is mechanically chewed. This stimulates salivary production. Chewing mixes the food with saliva to start the process of digestion.

2) Oral Phase:

Food is gathered up by the tongue to form a bolus ready to be propelled to the back of the throat. The tongue moves the bolus upwards and backwards. This triggers the start of the involuntary swallow.



3) Pharyngeal Phase:

This is an involuntary or automatic response. The soft palate raises to close off the nose. As food moves through into the pharynx the epiglottis closes off the airway and food is propelled into the oesophagus.

4) Oesophageal Phase:

Peristaltic movement of the oesophagus squeezes food down into the stomach.

Diagnosis and Treatment

Each medical condition that causes dysphagia can affect different phases of the swallow. Treatment advice may vary, according to the part of the swallow which is affected.

It is important to visit your medical practitioner if you are having difficulty with any part of chewing or swallowing.

Your GP will carry out an initial assessment and may refer you to another healthcare professional for tests. You may be referred to a speech and language therapist (SLT), a neurologist, a gastroenterologist, a geriatrician or ear, nose and throat (ENT) specialist.

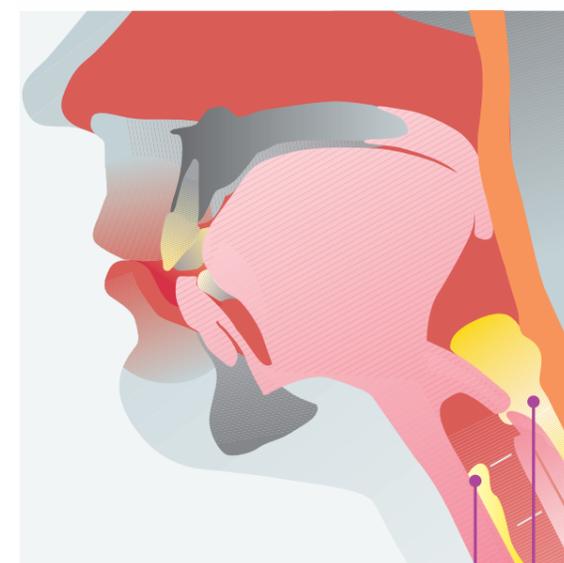
You can find in-depth details of different tests and treatment on the NHS web site:

www.nhs.uk/Conditions/Dysphagia

Videofluoroscopy

To examine your swallow in detail you may be referred for a videofluoroscopy swallowing assessment. This is like a live video x-ray which is recorded. You may be asked to swallow food and liquids of different thicknesses. The food and liquid contains barium which will show up on the video x-ray. The video can be viewed to see exactly how your swallow works.

Sometimes food or liquid travels the wrong way, into the airway. This is because the epiglottis has not closed in time. This is known as **aspiration**.



(A) Liquid/Food entering the airway during a swallow

(B) Liquid/Food travelling down the oesophagus to the stomach.

Aspiration

Food or liquid entering the airway is known as aspiration. This would normally make a person cough involuntarily; a cough is one of the protective mechanisms of the lungs. Some medical conditions can weaken the strength of this cough mechanism. If food or liquid enters the lungs and cannot be coughed up it can lead to a chest infection.

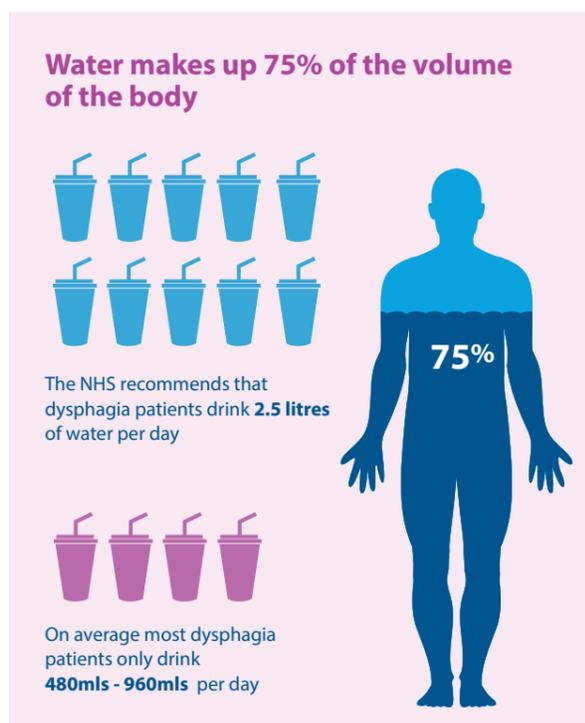
The image on the left shows what happens: Arrow (A) points to liquid which is aspirating and entering the patient's airway. All of the fluid should be travelling down the oesophagus (arrow B) into the stomach. This person has dysphagia.

The Importance of Hydration

Water intake is often a secondary consideration in dysphagia management ⁽⁵⁾. Water makes up 75% of the volume of the body. The NHS advises that where appropriate, patients should be drinking 2.5 litres of water per day ⁽⁶⁾. Many older people and those with dysphagia do not drink adequate amounts of water, consuming only 480–960 mls (2-4 glasses) per day ⁽⁷⁾.

Drinking enough fluid can assist in preventing or treating the following ailments ⁽⁸⁾

- Pressure ulcers
- Urinary infections and incontinence
- Heart disease
- Diabetes management
- Dizziness and confusion leading to falls
- Skin conditions
- Constipation
- Kidney stones
- Low blood pressure
- Cognitive impairment
- Poor oral health



Hydration and Dysphagia

Thickened fluids:

One way of helping patients with swallowing problems to take fluids without aspirating is to consume liquid of a thicker consistency. A speech therapist can give advice about thickened fluids. Fluid can be thickened artificially with powder or bought pre-thickened. There is an internationally agreed grading scale for food and liquids which is shown below.

FOODS			
TRANSITIONAL FOODS	REGULAR	7	
	SOFT & BITE SIZED	6	
	MINCED & MOIST	5	DRINKS
	PUREED	4	EXTREMELY THICK
	LIQUIDISED	3	MODERATELY THICK
		2	MILDLY THICK
		1	SLIGHTLY THICK
		0	THIN

Positioning:

The position in which you drink can also affect swallowing. One study ⁽¹²⁾ showed that:

“The chin down posture can have a positive effect on swallowing safety and reduce the incidence of aspiration and depth of penetration, in the context of cup drinking with thin liquids.” Fraser (2012)

Specialist dysphagia drinking devices are designed to aid drinking with a chin down posture. They are shaped to accommodate the nose which allows the cup to be fully emptied. There are other different postures and positions which you may be advised to adopt by your speech therapist that can also help with a more effective swallow.

It is important to receive the correct advice.

Hydration and Dysphagia

Drinking smaller quantities with each sip:

It is possible that limiting the amount of fluid consumed with each swallow can also make swallowing safer. ⁽¹³⁾ For example when recovering from a stroke you may be initially restricted to a 5cc teaspoonful of fluid.

Drinking devices are available which restrict the volume of fluid delivered with each tip of the cup (eg. Drink-Rite®). Sometimes those with learning difficulties or dementia may gulp fluid too quickly, risking aspiration. A controlled flow drinking cup like Drink-Rite will help to minimise the risk of aspiration when drinking too quickly (see pages 8 and 9).

Providing safe hydration : Choosing the right drinking device

	PRODUCT	KEY FEATURES	HANDLE OPTION	SPILL PROOF	THIN LIQUID	SLIGHTLY/MILDLY THICK LIQUID	MODERATELY THICK LIQUID
Drink-Rite®		<ul style="list-style-type: none"> • Only a small volume is delivered into the mouth. 5cc or 10cc inserts are provided with both the cup and beaker. • Safer option for patients who will not tolerate thickened fluids. • Safer option for patients with dementia or learning difficulties, to prevent 'gulping' (drinking too quickly). 	✓	✓ Spills only 5cc or 10cc at a time	✓	✓ Rinse insert thoroughly between uses	✗
Dysphagia Cup		<ul style="list-style-type: none"> • Weighted mug to help reduce spills for patients with a tremor. • Oval shape to accommodate the nose, which prevents the need to tilt the head back. (Safer chin tuck position can be achieved) • Base option to increase stability. 	✓	✗	✓	✓	✓
Sure Grip Mug		<ul style="list-style-type: none"> • Bright colours attract attention of those with dementia. • Thermal spout option shows when drink is too hot. • Small (narrow)/Large (wider) spouts for different fluid flow. 	✗	Some protection	✓ Small / Narrow spout	✓ Either spout	✓ Large / Wide spout only
Kapi-Cup®		<ul style="list-style-type: none"> • Small, Medium and Large sizes for children and adults. • Cut-away side to accommodate the nose, which prevents the need to tilt the head back. (Safer chin tuck position can be achieved.) 	✓	✗	✓	✓	✓
Novo Cup		<ul style="list-style-type: none"> • Flow controlled cup, requires the patient to suck the desired volume of fluid through the 90 degree angled straw. • Excellent for dependent patients; no need to tilt the head when drinking. 	✗	✓	✓	✓	✗

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Drink-Rite® - Providing **controlled** flow of fluids

Drink-Rite®

The Controlled Hydration Delivery System

Key Features

- Available in cup or beaker options each provided with 5cc and 10cc inserts. (Approx. cup holding volume 225cc.)
- Suitable for users who cannot tolerate thickened fluids
- Suitable for some thickened fluids (tested with 'Fresubin thickened Stage 1')
- Option for users with dementia or learning difficulties to prevent 'gulping' (drinking too quickly)
- Bite-safe and shatterproof
- Dishwasher safe
- Ideal for domestic as well as nursing home use

The Drink-Rite System provides a controlled, limited flow of fluid of 5cc or 10cc into the mouth without the user having to tilt their head.

This is important particularly after stroke or in the care of the elderly. Children with development issues could also benefit from the design features of Drink-Rite.

Drink-Rite®

Ordering information:

OSFSA5301	Comprising: Cup, 5cc & 10cc insert
OSFSA5302	Comprising: Beaker (no handles), 5cc & 10cc insert



Drink-Rite®
The **Controlled** Hydration Delivery System

Weighted to help **reduce spills**

Dysphagia Cup

Weighted Drinking Cup

Key Features

- Suitable for warm/cold fluids and thickened fluids
- Weighted to help reduce spills
- One piece construction with wide handle to allow extended palm, so gripping not required. The cup is supplied with a detachable base for extra stability
- Hand washing recommended
- Made of durable non-toxic polycarbonate material, cup base polyethylene

Kapitex Dysphagia Cup is oval shaped to accommodate nose clearance, which prevents the need to tilt the head whilst drinking.



Dysphagia Cup

Ordering information:

Supplied with detachable base for extra stability

OSFSA5002	200 ml	Almond
OSFSA5003	200 ml	Clear Green

Dysphagia Cup shown with detachable base for extra stability

Available in **3 sizes** in packs of 5

Kapi-Cup®

Drinking Cups

Key Features

- Made of polypropylene with smooth moulded edges; bite-safe and shatterproof
- Suitable for warm/cold fluids and thickened fluids
- Small size (30ml) ideal for use with children
- The medium and large sized cups are supplied with a double handle holder
- A choice of single or double handle holders are available in packs of 2
- Dishwasher safe



Kapi-Cups have a cut-out on the non-drinking side so that they can be tilted without interference by the nose.

This allows the drinker to avoid tilting the head back, thus minimising the chance of liquid entering the airway and causing choking.



Kapi-Cup® shown with blue 80 ml cup

Kapi-Cup®

Ordering information:

OSFSA5501	Kapi-Cup Green	Small 30ml	Pack of 5
OSFSA5502	Kapi-Cup Blue	Medium 80ml	Pack of 5
OSFSA5503	Kapi-Cup White	Large 160ml	Pack of 5
OSFSA5504	Kapi-Cup Holder Single Handle	Blue	Pack of 2
OSFSA5505	Kapi-Cup Holder Double Handle	Blue	Pack of 2

Easy grip, in four colours, two spouts and thermo lid option

Sure Grip Mugs

Easy Grip Drinking Mugs

Key Features

- Lids available with small aperture, large aperture (for thickened fluids) and thermo lid (heat sensitive lid which changes colour if liquid too hot)
- Flow of liquid can be controlled by sucking on spout or depressing centre of lid
- Suitable for warm and cold fluids
- Each lid features a valve which prevents leakage if the mug is tipped over
- Choice of bright colours, to attract the attention of those with dementia
- Optional straw holder attachment which holds the straw in place on the mug rim
- Dishwasher, microwave and freezer safe



Sure Grip Mugs

Ordering information:

OSFSA5201	200 ml	Mug	Clear
OSFSA5202	200 ml	Mug	Blue
OSFSA5203	200 ml	Mug	Yellow
OSFSA5204	200 ml	Mug	Red
OSFSA5205	Lid - Small Hole and Valve		
OSFSA5206	Lid - Large Hole and Valve		
OSFSA5207	Thermo Lid - Small Hole and Valve		
OSFSA5208	Straw Clips	Pack of 2	

Delivering complete control of flow rate

Novo Cup

Drinking Cup

Key Features

- Suitable for warm and cold fluid
- Dishwasher and microwave safe
- Spill proof clear plastic beaker – so contents are visible
- Contains up to 250ml liquid with measured markings

This cup is excellent for dependent patients and ideal for those with restricted movement of the head and neck. The user is in complete control of the flow rate of fluid by sucking on the spout when the cap plug is in place.

Novo Cup

Ordering information:

OSFSA5101	Novo Cup with Lid and 2 straws (250ml)
OSFSA5102	Straws for Novo Cup Pack of 50



Ideal for **feeding** therapy

Maroon Spoons

Feeding Spoons

Key Features

- Smooth rounded profile and made from polycarbonate
- Shatterproof (not suitable for severe bite reflex)
- Easy to clean and dishwasher safe
- Available in 2 sizes in packs of 20

These sturdy spoons have shallow, narrow bowls and the design makes it easier to get foodstuffs into the mouth compared with a traditional spoon.

Adults and children with feeding problems such as poor lip closure, tongue, throat and oral hypersensitivity will benefit from using these spoons.



Dimensions - Small Spoon

- Bowl Dimensions, widest point: 25mm
- Bowl Length: 35mm
- Length of spoon: 145mm

Dimensions - Large Spoon

- Bowl Dimensions, widest point: 31mm
- Bowl Length: 40mm
- Length of spoon: 150mm

Maroon Spoons

Ordering information:

OSFSA4901	Small	Pack of 20
OSFSA4902	Large	Pack of 20

Oral **therapy** and **assessment** tool

OraStim

Oral Motor Stimulator

Key Features

- Smooth and textured ends
- Can be bent into shape
- Single patient use and versatile

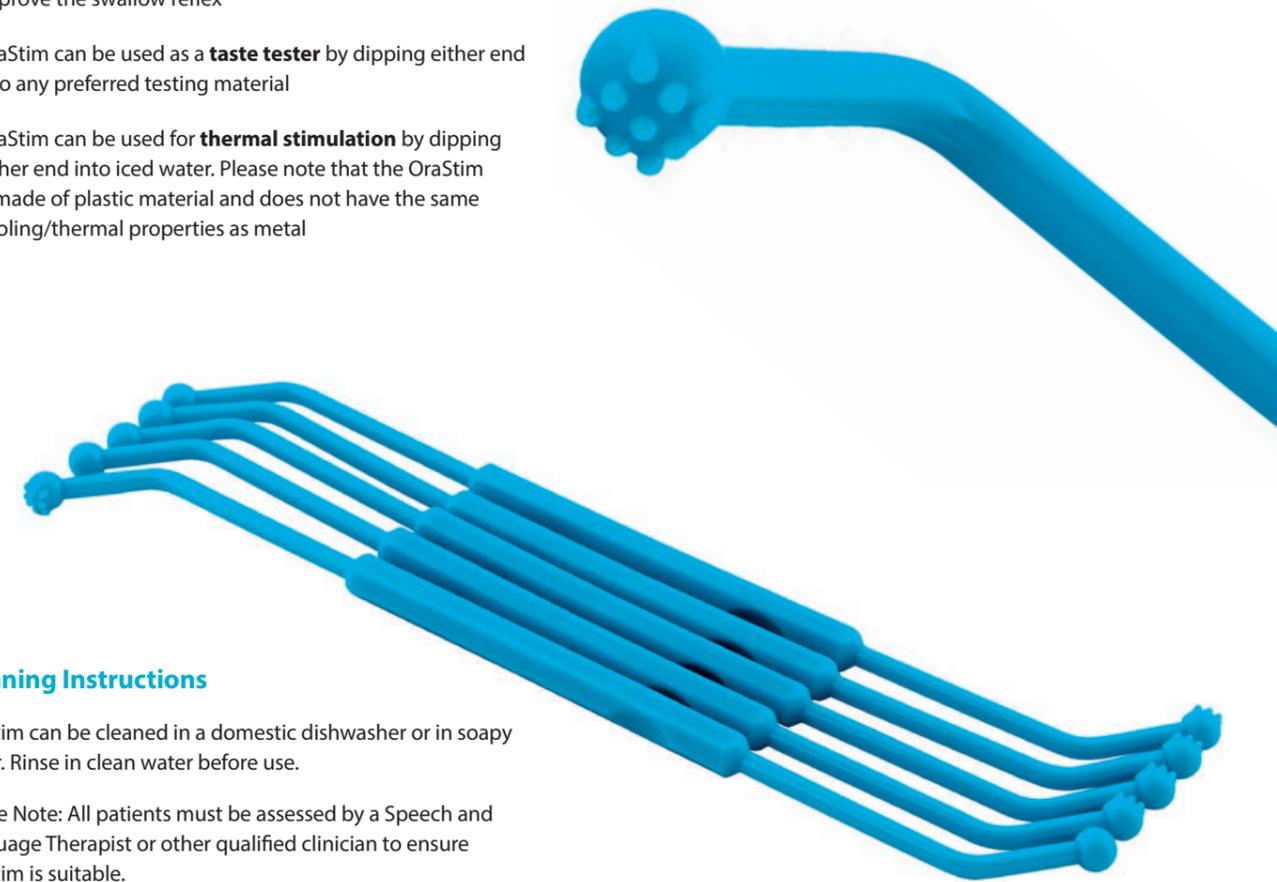
A dedicated tool for the therapist to encourage stimulation in the oral cavity following surgery, stroke or other neurological disorders.

- OraStim has two heads, one smooth and one textured. Both ends are suitable to assess the sensitivity of the oral cavity. The therapist should always start giving therapy with the smooth end and move onto the textured end if appropriate. The OraStim can be bent/shaped to enable easy access to the oral cavity
- OraStim can be used to stimulate the **faucial arch** to improve the swallow reflex
- OraStim can be used as a **taste tester** by dipping either end into any preferred testing material
- OraStim can be used for **thermal stimulation** by dipping either end into iced water. Please note that the OraStim is made of plastic material and does not have the same cooling/thermal properties as metal

OraStim

Ordering information:

OSORS0001	OraStim	Pack of 10
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Cleaning Instructions

OraStim can be cleaned in a domestic dishwasher or in soapy water. Rinse in clean water before use.

Please Note: All patients must be assessed by a Speech and Language Therapist or other qualified clinician to ensure OraStim is suitable.

Dedicated to **effective therapy** in **speech and swallow**

Ora-Light®

Oral Motor Exercise System

The Ora-Light System of oral motor exercise tools is a major step forward for the Speech & Language Therapist. Providing a set of practical tools for the successful treatment of patients with speech and swallow disorders.

Key Therapy Benefits

- Aids the Speech & Language Therapist to target and maximise rehabilitation outcomes of patients with oral motor deficits
- Ora-Light exercise tools help to improve the strength and movement of specific lip, tongue and cheek musculature
- Specifically crafted from shatter-proof material to incorporate shape and tactile areas which encourage proper tongue/lip movements and contact
- Simple to use with a comprehensive suggested exercise protocol, highlighting the specific muscles exercised, and indicating the phonetic articulator placement for sound production
- Each tool is for single patient use
- Inexpensive and cost effective. The cost of Ora-Light is the price of the solution, not the cost of the problem

Ora-Light® System

Ordering information:

OSORL1100	Ora-Light System Kit Small (Orange)	All 4 tools plus manual
OSORL2100	Ora-Light System Kit Large (Blue)	All 4 tools plus manual

Please visit www.ora-light.com for more information.



Ora-Light® System Kit (Small)



Exercise Tool 1
Lip Stimulator



Exercise Tool 2
Tongue Tip Stimulator



Exercise Tool 3
Tongue Shield Stimulator



Exercise Tool 4
Back Tongue Stimulator



Ora-Light® System Kit (Large)

Therapeutic **neuromuscular electrical stimulation** technology for **Dysphagia**

Ampcare

Effective Swallowing Protocol (ESP™)

Ampcare ESP™ is a non-invasive, FDA-cleared treatment for dysphagia that combines the most effective electrical stimulation parameters with resistive exercises.

- Ampcare's Effective Swallowing Protocol (ESP) is a new treatment that combines electrical stimulation with specially selected resistance exercises to help rehabilitate the swallow function to help patients swallow safely. The Speech and Language Therapy (SLT) team in Sheffield Teaching Hospitals (STH) NHS Foundation Trust were interested in evaluating this new treatment approach to see whether it might be helpful to patients in the UK via adoption by the NHS. Funding was secured in order to undertake a pilot study comparing Ampcare's ESP against usual dysphagia treatment for 30 stroke patients
- At follow-up, one month after the end of treatment, 100% of the Ampcare ESP patients reported improved swallow-related quality of life (i.e. SWAL-QOL Survey), compared to 42% of the patients who had received usual dysphagia care
- As a result of the evidence from the pilot trial, SLT professionals were keen to have Ampcare ESP as a treatment option. Following training days in October 2016 and July 2017 we are pleased to announce that the technology is now launched in the UK



Ampcare ESP™

Ordering information:

OSAMP0001	ESP™ Kit (Ampcare ES™, 10 pkg Large – Adult E Series electrodes, RPD)
OSAMP0002	ESP™ Kit (Ampcare ES™, 10 pkg Small – Youth E Series electrodes, RPD)
OSAMP0003	RPD (Restorative Posture Device)
OSAMP0004	RPD Replacement Pads
OSAMP0005	E Series Adult Large Electrodes 1.5" x 1.75" (4/pkg) – 10 packages
OSAMP0006	E Series Youth Small Electrodes 1.0" x 1.25" (4/pkg) – 10 packages
OSAMP0007	Ampcare ES™ (NMES unit + 10 packages Adult Large E Series Electrodes)
OSAMP0008	Ampcare ES™ (NMES unit + 10 packages Youth Small E Series Electrodes)
OSAMP0010	Replacement Lead Wire Set (2) for Ampcare ES™
OSAMP0011	ONLINE Training Course 8 Hours



Please visit www.swallowtherapy.com for more information.

The **innovative** Oral Motor Device to develop **biting and chewing** skills

Chewy Tubes®

Oral Motor Devices

Key Features

- Develop biting and chewing skills
- Graded exercise regime
- Textured surfaces for sensory feedback

What are Chewy Tubes?

- Chewy Tubes are innovative oral motor devices designed to provide a resilient, non-food, chewable surface for practising biting and chewing skills. Chewy Tubes have been designed to be used with the Jaw Rehabilitation Programme, a patented methodology to develop jaw motion for biting and chewing skills
- Chewy Tubes offer a safe, non-toxic surface for developing biting and chewing skills. Chewy Tubes are latex-free and lead-free. In addition, they do not contain PVC or phthalates
- Chewy Tubes are available in fun and attractive colours. Yellow Chewy Tubes offer a smaller stem size for chewing while Red Chewy Tubes offer a slightly wider stem size

How are they used?

Chewy Tubes are offered for tactile input at the location of the molar dentition/molar gum region as follows:

1. Present one Chewy Tube laterally into the mouth.
2. Touch the stem of the Chewy Tube to the cutting surface of the molar teeth/gum.
3. Help improve jaw stability and provide valuable sensory input into the jaw through biting on the Chewy Tube.

Chewy Tubes should always be used with supervision. Assessment of the jaw is recommended prior to biting on Chewy Tubes. Patients should follow the recommendations of their therapist or caregiver when using Chewy Tubes.

P & Q Chewing Aids

P & Q Chewing Aids provide more resistance than the Chewy Tubes, as they do not easily compress when chewing or biting takes place.



Super Chews

The Super Chew was developed to increase the range of Chewy Tube brand products available to develop biting and chewing skills. The Super Chew is a variant of Chewy Tube that offers a variety of features that complement those found in other Chewy Tubes.

- First, the Super Chew is solid rather than hollow. This feature gives the Super Chew greater rigidity and consequently greater resistance to chewing than do Chewy Tubes that are hollow
- Second, the Super Chew features a closed loop handle to facilitate a secure grip on the product when in use. This feature is especially useful to individuals lacking fine motor skills in the hands and fingers
- The Super Chew is available in two varieties. The Green Super Chew is smooth and offers a uniform surface for practising biting and chewing skills. The Red Super Chew is textured and can be used both for biting and chewing exercises as well as enhancing tactile stimulation for sensory integration. Super Chews enhance the variety of Chewy Tubes available, based on the patient's needs



Chewy Tubes®

Ordering information:

OSCHW0001	Chewy Tube	Smooth	Yellow
OSCHW0002	Chewy Tube	Smooth	Red
OSCHW0003	Chewy Tube	Knobbly	Green
OSCHW0004	Chewy Tube	Smooth	Blue
OSCHW0005	P & Q	Smooth	Orange
OSCHW0006	Super Chew	Knobbly	Red
OSCHW0007	Super Chew	Smooth	Green
OSCHW0100	Jaw Rehab Programme Kit (Inc 8 Chewy Tubes & 25 Assessment Forms)		

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