



Quantifying Swallowing Function after Stroke

Ehsan Kaviani¹, Azin Golmoradizade²

¹ MSc, in speech therapy, Musculoskeletal Rehabilitation Research Center, Jundishapure University of Medical Science, Ahvaz, Iran

¹ Speech and Language Pathologist, Tehran University of Medical Sciences, Tehran, Iran

Article Info	ABSTRACT
Article type: Review article	Background and Aim: stroke patients suffer from dysphagia, which is the most significant risk factor for the development of pneumonia and could also delay the patient's functional recovery. 1-3 Pneumonia accounts for about 34% of all stroke-related deaths and is the third-highest cause of death during the first month after a stroke. In the present study we sought to develop a quantitative functional dysphagia scale, based on a videofluoroscopy, which could comprehensively reflect the swallowing functions of stroke patients.
Article History: Received: 20 January 2020 Revised: 04 March 2020 Accepted: 14 May 2020	Materials and Methods: This review article is about Quantifying Swallowing Function After Stroke from Science Direct, Pro quest and Pub med Data Bases. 12 articles had been selected according to inclusion criteria from 2011 to 2019 and 3 of them had been deleted by exclusion criteria.
Keywords: Deglutition Pneumonia Stroke	Results: The present study pioneered the development of a functional dysphagia scale using videofluoroscopic results of the acute and subacute stages of stroke patients. Because of earlier detection and management of swallowing difficulty in stroke patients, early videofluoroscopy would help reduce the chance of aspiration pneumonia. We believe that the functional dysphagia scale should be evaluated in other diseases. Naturally, this will call for further research. Conclusion: Dysphagia and aspiration pneumonia frequently occur as poststroke complications. Videofluoroscopy is well suited to studying the anatomy and physiology of the oral, pharyngeal, and esophageal stages of deglutition and to defining management strategies that will improve the dysphagic patient's swallowing safety or efficiency.