

# Helping a Person with Dementia to Eat and Drink Safely

People with dementia often develop problems with swallowing as their disease progresses. This affects their ability to eat and drink.

Reading this handout will help you and your family learn:

- ✓ about the difficulties your loved one may have with eating and drinking
- ✓ how to help them eat and drink safely



## How do swallowing problems develop?

Swallowing problems can develop as part of the natural course of dementia.

A person with dementia may have no problems eating or drinking for the first few years. Then, they may begin to have difficulty with swallowing. The medical term for this is dysphagia. As dementia progresses, swallowing problems can get worse. The person will need foods that are easy to swallow, and help with eating and drinking.



## **Why are swallowing problems a concern?**

Swallowing problems can prevent your loved one from getting the fluids and foods they need to stay healthy.

- Not drinking enough can lead to urinary problems, headaches, increased confusion and constipation.
- Not eating enough can lead to fatigue, weak muscles and weight loss.

Swallowing problems also increase the chances that food, drinks, or medications will go into the airway and lungs instead of going down into the stomach.

This can cause a lung infection called pneumonia. Pneumonia can be serious for a person with dementia, because they may not be able to clear their lungs of the infection.

## **Who can help with my loved one's swallowing problems?**

A Speech-Language Pathologist can:

- Help your loved one swallow more safely. This will lessen the chances that they will get pneumonia.
- Help you find the safest foods and drinks for your loved one.
- Give you helpful tips for helping your loved one eat and drink safely.

A Registered Dietitian can help you choose nutritious food and drinks, and plan how to give your loved one the energy (calories) they need to stay healthy.

Other members of health care team (such as the hospital doctor, family doctor, nurse practitioner and neurologist) can answer your questions about dysphagia and offer help and support with your loved one's eating.

## What types of swallowing problems may develop over time?

Swallowing problems	Examples
<b>Mild</b>	<ul style="list-style-type: none"> <li>• Difficulty with chewing.</li> <li>• Eating more quickly or more slowly than before.</li> </ul>
<b>Moderate</b>	<ul style="list-style-type: none"> <li>• Swallowing too late. For example, food may start to fall into the throat before your loved one swallows.</li> <li>• Holding food or medications inside the cheeks. This is called pocketing. Your loved one may not be aware that there is something in their mouth to swallow. You may need to tell them to swallow.</li> <li>• Changes in likes or dislikes of food and drinks. Your loved one may only want to eat a favourite type of food, or may no longer like a food that they once enjoyed.</li> <li>• May need reminders to open their mouth for food, drinks, medications, or mouth care.</li> <li>• May need help feeding themselves or setting up their meal.</li> </ul>
<b>Severe</b>	<ul style="list-style-type: none"> <li>• May need others to feed them.</li> <li>• May not open mouth for food, drinks, medications or mouth care.</li> <li>• Unable to coordinate the steps involved in eating or drinking (putting food in the mouth, then chewing, then swallowing).</li> <li>• Severe pocketing. Your loved one may not chew food at all, or may allow foods and liquids to drip out of their mouth, or drip back towards their throat.</li> <li>• Towards the end of life, your loved one may stop swallowing altogether. They may not feel hunger or thirst anymore.</li> </ul>

## How can I help my loved one eat and drink?

- Prepare foods and drinks that your loved one likes. Food that looks and smells good can stimulate your loved one's appetite. Stronger flavours or sweeter foods can often help increase how much your loved one eats and drinks.
- Offer small amounts of food and drinks throughout the day, instead of three large meals. Your loved one may not be able or willing to eat large meals.
- Alternate one bite of sweet food followed by one bite of sour, or alternate food temperatures. For example, give one bite of something hot, one bite of something cold.
- Carefully feed your loved one, one teaspoon at a time. Make sure each mouthful is swallowed before giving another spoonful.
- Allow extra time for eating. Your loved one may start and stop eating many times. You may need to gently remind them to eat or swallow.
- Try to make meals a quiet time with few distractions. This helps your loved one focus on eating.
- Ask the health care team about which foods and drinks to choose, and how much to give your loved one each day. A Registered Dietitian can give you specific advice.
- If your loved one is coughing, choking or clearing their throat often while eating, tell the doctor or Speech-Language Pathologist right away. These are signs that the food is going in the airway, not the stomach.

### For more information or help:

- Call your Speech-Language Pathologist \_\_\_\_\_ at \_\_\_\_\_.
- Talk with your family doctor and the health care team at the hospital.
- Ask your health care team to arrange for you to speak with a Registered Dietitian.

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