

Choices



Speech and swallowing



Read me...

Speech and swallowing

Why does MS cause speech problems?

Although many of us take the gift of speech for granted, it is actually an extremely complex process that requires fine control and co-ordination. In MS, difficulties can result when lesions occur in the area of the brain that facilitates speech. These difficulties can vary from being almost imperceptible to severe. In addition, fatigue can affect the voice, making it very weak, especially towards the end of the day when you are tired or during periods of relapse. On occasion, low blood sugar levels can have the same effect.

Effects

By far the most common problem is slurred speech. This can cause embarrassment which can lead to a lack of self-esteem and which may in turn cause more hesitation in speech, making the problem worse. Other speech problems include weakness or softening of the voice and abnormally long pauses between words or syllables (called scanned speech).

In some cases lesions in the brain cause a lack of understanding of what is being said and an inability to recall the vocabulary and grammar with which to construct a reply; this is known as dysphasia. Where understanding is still intact, yet the person has difficulty recalling words and building sentences, this is known as dysarthria.

Treatments

Being able to communicate effectively is vital to make our wishes known and to manage our relationships. Failing to speak clearly or make yourself understood can have a huge impact on self-confidence and quality of life. However, a Speech and Language Therapist is almost certain to be able to offer you help. They will devise strategies to help you cope with your speech problems by achieving more control over the way in which you form words and sentences.

A Speech and Language Therapist will work with you on strategies and exercises like

- How to strengthen the muscles you use when you talk
- The importance of good posture
- Clear articulation
- Managing the speed at which you talk
- Making the most of intonation and emphasis
- Avoiding over exertion
- Avoiding speech when there is a lot of background noise

Self-management tips

- If you are relaxed and happy your speech will be easier and both you and the person you are communicating with will find it a less stressful experience
- Take your time and repeat yourself if needed
- Think about background noise when communicating. Don't try and

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compete with the TV or radio and cut out environmental noise if you can

- Your nonverbal communication will help people understand you. Your body language, physical gestures and even raised eye brows can help get your message across and aid communication

Why does MS Cause swallowing difficulties?

Swallowing is such an automatic response that we give it little thought unless it starts to give us a problem. The medical term for swallowing difficulties is dysphagia.

Around 30% to 50% of people with MS have some degree of difficulty in swallowing. This is due to myelin damage in the part of the brain that controls the swallowing mechanism or in the nerves connected to it.

Effects

Some of the effects that are caused by swallowing difficulties can be

- Coughing and choking when eating
- Difficulty chewing
- A build-up of excess saliva
- A weakening or softening of the voice
- The sensation that something is 'stuck' in the throat
- People may experience 'aspiration' (food going down the windpipe and into the lungs)
- Lung infections

When we swallow two things happen:

1. The tongue is raised to block the opening to the nasal passage. It is then drawn back and a piece of cartilage called the epiglottis moves to a horizontal position to close the airway. The voice box moves up and out to complete this airway closure. This prevents food from entering the windpipe. If the manoeuvre is not completed successfully a choking reflex clears the passage – we usually describe this as food or drink 'going down the wrong way'.
2. Throat and oesophagus muscles then contract and relax to create waves that push the food into the stomach. When this wave reaches the stomach the muscles sealing the stomach entrance relax and after the food has entered the sphincter (a muscle) closes in order to prevent regurgitation.

The swallowing problems caused by MS often manifest themselves in swallowing when you are not ready to do so or in choking or spluttering over food. Sometimes food is regurgitated involuntarily.

Treatments

Early detection and appropriate treatment can successfully reduce the problems associated with swallowing difficulties. It is important that carers, families and friends also recognise this as a potential problem

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and understand that it is not limited to people with more advanced MS.

If you are seeking the support of health professionals, depending on your needs, there may be a multidisciplinary approach taken to supporting speech and swallowing difficulties. This means that there will likely be many professionals involved in assessing and addressing your speech and swallowing issues.

Health professionals who may be involved and their roles are:

- A Speech and Language Therapist's role is to help deal with problems related to communicating, eating, drinking and swallowing
- A Dietician's role may be to advise on the types of food that are likely to be easy to swallow and to ensure that you are getting good levels of nutrition. A dietician may also give you advice on thickening drinks or blended foods
- A Radiologist may be involved to complete a video-fluoroscopy, which takes a moving X-ray and can verify the exact nature and location of your swallowing problem

If swallowing problems become prolonged and an ongoing issue that could potentially put you at risk, nutrition can be provided through a procedure called a 'percutaneous endoscopic gastrostomy' (PEG). This involves a tube being inserted through the abdomen directly into your stomach and food is given this way.

Family carers or paid carers can easily be trained to use a PEG feeding system and should be taught to do so by the health professionals involved.

Self-management tips

- You can also help by tucking in your chin when you swallow. Even a centimetre or so will help close the airways
- Avoid rushing your meals and take time to chew well
- Alternate liquid with solid food to moisten it and avoid speaking whilst you are eating
- Remain upright for at least 30 minutes after your meal. Posture is very important and you can get sometimes get support and advice around these issues from a physiotherapist either via NHS health services, privately or at your local MS therapy centre
- If you are finding you are having problems with eating or drinking you might also like to introduce softer foods into your diet or liquidise some of your food. A Dietician may give you advice on thickening drinks by adding a product (sometimes corn-starch)

It is recommended that first aid treatment should be learned by you and your family carers if you are concerned about the risk of choking. The Red Cross or the St John Ambulance service may run free or discounted first aid training in your area.

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Red Cross
www.redcross.org.uk

St John Ambulance
www.sja.org.uk/sja/first-aid-training-courses.aspx

A referral to a Speech and Language Therapist can be made by your MS nurse, GP, member of your neurology support team or a social care professional such as a social worker. Often the perception of Speech and Language Therapists are that they are only in place to help with talking, this is not the case, Speech and Language Therapists are trained professionals in all aspects of communication and swallowing. Speech and language Therapists and are often the key health professional to work with if there is an issue with speech or swallowing.

Speech and Language Therapists may see you in your own home or a clinic depending on services in your area.

For more information please see visit the Royal College of Speech and Language Therapists at www.rcslt.org.

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How we create our Choices leaflets

MS-UK believes we must listen to the voices of people affected by multiple sclerosis to shape the information and support we provide. It is these people that bring us perspectives that no one else can give.

For every Choices leaflet we produce, MS-UK consults the wider MS community to gather feedback, and uses this to inform content. All of our Choices leaflets are then reviewed by the MS-UK Virtual Insight Panel before they are published.

Thank you to everyone affected by MS who made this leaflet possible.

Sources

- None cited

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