

Swallowing problems in Head & Neck Cancer

Causes of swallowing problems (dysphagia)

Difficulties in swallowing can be caused by:

- The cancer itself. The tumour can be pressing on organs which are vital for swallowing e.g. a tumour on the tongue can hinder the tongue movements in clearing and moving food from the front to the back of the mouth. Tumours in the throat can cause pain on swallowing.
- The side effects of treatment, includes:
 - Xerostomia – hinders chewing of food; a reduction in saliva can make it difficult to masticate and break down food in the mouth. In addition it can make movement of food from the front and back of the mouth difficult.
 - Reduction in taste, appetite loss, mucositis (pain and inflammation in the throat) can worsen swallowing problems.
 - Swelling of the throat and the voice box can make food and drink go down the wrong way and / or it can prolong the act of swallowing e.g. you may find that you may have to do an abnormal number of swallows to get a small amount of food down.
 - Long-term effects include fibrosis (hardening / scarring / tightening of the muscles involved in swallowing). This in turn can lead to reduction in the range of movement of the muscles involved in swallowing. As a result, your swallow can become inefficient i.e. eating becomes
 - prolonged, you may have to use multiple liquid washes to get food down and your swallow may become unsafe (i.e. food and liquid going down the wrong way). Fibrosis can also cause you to lose sensation in the throat so you may not cough even when food and drink are going down the wrong way.
 - Surgical treatment can alter the anatomy of the mouth and throat and this can indirectly alter the way the muscles work in swallowing e.g. removing part of your throat muscles because of a cancerous growth and replacing part of your throat with a flap from your thigh means that the flap will not function in the same efficient way as the part that is removed. As a result food can get stuck in your throat.

Managing swallowing difficulties

- If you experience pain on swallowing, take pain-killers at least ½ hour before you attempt to eat.
- If swallowing becomes too difficult, see if you can drink instead. Water is best.
- Try eating small amounts of pureed food e.g. soups, yoghurts, mousses etc. to begin with.
- Use liquid washes if needed to clear food in your throat.
- Mash up your food in the initial stages post-treatment; concentrate only on very soft foods which does not require a lot of chewing.

- Always maintain oral hygiene.

Monitor for these signs of food and drink going down the wrong way:

- Coughing and / or choking after eating and drinking.
- Recurrent chest infections.
- Temperature spikes after having resumed oral intake for a while.
- Gurgly or wet voice especially after swallowing diet or fluids.
- Significant weight loss over a short period of time.

Seek advice from the speech and language therapist if any of the above signs occur / if you have a sensation of food getting stuck in your throat / if drinks come down your nose.

How to contact us

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Contact details



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We need your comments, concerns complaints and compliments to deliver the best service possible. Please let us know by speaking to a member of our staff. We learn from your feedback and use the information to improve and develop our services.

If you would like to talk to someone outside the service contact the **Patient Experience Team** on **0800 783 5774**, or email cdda-tr.PatientExperienceCDDFT@nhs.net.

We can make this information available in Braille, large print, audio or other languages on request.

Date Published: May 2023
Date of Review: May 2026
Responsibility: Speech & Language Therapy
Reference No: PIL/CG/0486
Version: 2