From Dr. Escudé...

Important Factors in Providing Oral Stimulation and Assessing for Potential Return to Oral Feedings in People with Intellectual and Developmental Disabilities (IDD)

Many agencies have implemented a service policy that requires at least annual evaluation of the oral-motor status of people with swallowing issues, such as dysphagia. This is particularly true for people who eat via enteral feeding, such as nasogastric, gastrostomy or jejunostomy feedings.

For many people, the need to eat by other than an oral route is driven by the acute phase of an illness, such as bowel obstruction or kidney infection, among many.

Adult human beings tend to produce about 1000 cc’s of saliva every 24 hours, which most will swallow several times a minute without thinking about it. In addition to initiating digestion in the mouth, saliva also reduces the acidity of the normal refluxate, and prevents irritation of the lower esophagus by the normal acidic backflow. When people drool excessively and fail to swallow this therapeutic fluid, chronic esophagitis can develop. This can be very painful and reduce the person’s desire to eat by mouth.

Annual assessment of oral-motor status is helpful in other ways. Swallowing is like other motor activities in the body. Efficacy is often lost when the skill is not practiced regularly. Like balance, swallowing ability is often reduced with age. Swallowing, being one of the most complex physical activities in the body, may begin to deteriorate quite early in people with IDD who are aging. In people with Down’s Syndrome, swallowing issues may be a hallmark of Alzheimer’s Disease.

Many people who were placed on alternative nutritional intake should be assessed for the ability to return to at least partial eating by mouth in that it helps in the management of oral secretions, provides social and sensory stimulation and initiates the primary peristaltic wave that ends with large bowel function at the bottom of the GI tract.
There are many techniques now available to assist people to achieve and maintain oral-motor competency. Even flavoring secretions through oral-motor stimulation techniques can enhance the quality of someone’s life. For many people, this is not a matter of if the person receives oral stimulation, but how to provide it safely.

Thanks for your careful attention to helping improve the lives of people we support.

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Dr. Escudé has dedicated his career to providing healthcare for people with IDD and other vulnerable populations and teaches on the subject throughout the country.