



Swallowing, eating and drinking



PSP may affect your ability to swallow.

Difficulties with swallowing are quite common in PSP and can lead to:



- Coughing and choking when eating or drinking
- Taking a long time over meals or leaving food in the mouth
- Increased phlegm which is difficult to clear
- Weight loss
- Repeated chest infections as a result of food sliding into the lungs instead of the stomach (often referred to as 'aspiration').



Food and drink are such an integral part of our lives, helping us to maintain our health, whilst also providing an opportunity to socialize. If you are experiencing swallowing difficulties you may feel embarrassed about eating in front of others. Or you may feel that food is no longer enjoyable because it takes a long time to eat it, or because eating and drinking makes you cough, causing anxiety for you, your family, carers and friends.

If you experience any difficulty in swallowing, ask your GP for an urgent referral to your SLT, who can carry out a full assessment of your swallowing ability. The SLT can advise on swallowing techniques, and may also suggest the best consistency of food and drink, to make mealtimes easier and safer for you. The SLT works closely with the dietitian, who may suggest specially made food supplements for you, to help you maintain a healthy weight.

If swallowing is becoming very difficult, your healthcare team may suggest that you try an alternative method of eating, known as Percutaneous Endoscopic Gastrostomy (PEG). This is a method, which involves being fed via a small tube that is placed into your stomach, bypassing the need to eat and drink through the mouth. Remember, as with any medical intervention, the decision whether or not to have a PEG fitted is yours. For more information on PEG please contact the helpline, information and advisory service.

What else might affect your ability to eat and drink?

Some of the other symptoms of PSP can also affect your enjoyment of meals. If you have problems with downward eye movement this can make it harder to see the food on your plate and get it to your mouth without spillage. Or if you have difficulty sitting comfortably or getting in a good position due to your posture or muscle stiffness, this can also have an impact on eating. Your occupational therapist can offer advice and equipment if appropriate to help you to get the best out of mealtimes.

If you are experiencing some cognitive issues, you may find that you suddenly have a very sweet tooth, or perhaps that you try to put too much food into your mouth at once. This can present an issue, particularly if you have some problems swallowing, and you may find that the people around you monitor you a little more closely at mealtimes, to keep you safe.

Top Tips

- Talk to your GP if excess saliva or phlegm is presenting a problem at mealtimes. **See section on *Saliva, dry mouth and oral health*.**
- Chewing slow and difficult? Avoid things like thick cuts of meat or slow cook foods so they are tender
- Getting food stuck? Avoid dry and crumbly things. Add sauces to your meals or alternate mouthfuls of food with sips of water
- If you find that you are eating more slowly, consider purchasing a plate warmer to keep food warm and palatable.