

# Advanced Swallow Assessment for Acute Stroke Patients

This is a specialized method for swallowing assessment that grades dysphagia severity by visualizing the swallowing process directly in response to foods/liquids of varying consistency. It should be administered by speech & language therapists or specialist clinicians with access to FEES medical imaging equipment and trained in its use. Perform within 72 hours of acute stroke in patients who failed initial swallow screening, those with severe neurological deficit (NIH-SS >10), or those with severe facial palsy/dysarthria/aphasia.

## OPTION 1

### Fiberoptic Endoscopic Dysphagia Severity Scale (FEDSS)

(if access to FEES equipment and suitably trained staff)

FEDSS Protocol	Main Findings	Clinical Implications
Saliva	Penetration/aspiration	<b>Score 6:</b> No oral food, consider NGT feeding, watch for respiratory distress
↓		
Purée	Penetration/aspiration without or insufficient protective reflex	<b>Score 5:</b> No oral food, consider NGT feeding
↓		
Purée	Penetration with sufficient protective reflex	<b>Score 4:</b> Consider NGT feeding, small amounts of puree (IDDSI 4) during swallowing therapy
↓		
Liquid	Penetration/aspiration without or insufficient protective reflex	<b>Score 4:</b> Consider NGT feeding, small amounts of puree (IDDSI 4) during swallowing therapy
↓		
Liquid	Penetration with sufficient protective reflex	<b>Score 3:</b> Puréed food (IDDSI 4); parenteral application of fluids
↓		
Soft solid food	Penetration/aspiration or massive residues in valleculae or pyriformes	<b>Score 2:</b> Puréed food (IDDSI 4) and liquids (IDDSI 0)
↓		
Soft solid food	No penetration/aspiration and not more than moderate residues in valleculae or pyriformes	<b>Score 1:</b> Soft solid food (IDDSI 6) and liquids (IDDSI 0)

## OPTION 2

### Clinical Swallowing Examination

(if access to FEES equipment and/or suitably trained staff not possible)

As per local protocol, and typically includes:

- a case history
- physical examination
- oral/laryngeal/pharyngeal examinations
- self-assessment
- cognitive assessment
- trial swallows (as appropriate, e.g., GUSS)

*For the guidance of HCPs only. Repeat daily during first days. If dysphagia persists, repeat at least twice per week and before discharge.*

FEES: fiberoptic endoscopic evaluation of swallowing; GUSS: gugging swallowing screen; IDDSI: international dysphagia diet standardization initiative; NGT: nasogastric tube; NIH-SS: National Institutes of Health stroke scale

**Adapted from:** Dziewas R, Warnecke T, Olenberg S, et al. Towards a basic endoscopic assessment of swallowing in acute stroke - development and evaluation of a simple dysphagia score. *Cerebrovasc Dis.* 2008;26:41-47

The Angels Initiative is a non-promotional, healthcare project of Boehringer Ingelheim International GmbH to support the ESO and WSO in implementing their main goal: to improve stroke care around the world.

Nutricia's support of the Angels Initiative aims to help healthcare professionals and stroke centres improve screening and nutritional management of dysphagia.

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