

# IMPROVING THE SPEECH AND LANGUAGE THERAPY (SLT) REHABILITATION PATHWAY FOR PATIENTS WITH LATE EFFECTS SWALLOWING DIFFICULTIES (DYSPHAGIA) RESULTING FROM HEAD AND NECK CANCER TREATMENT.

Kerry Davies Macmillan Speech and Language Therapist  
 Menna Payne Macmillan Clinical Lead Speech and Language Therapist  
 Lindsey Jose Macmillan Associate Practitioner Head and Neck(SLT/Dietetics)

## BACKGROUND

The project was initiated due to increased survival rates in Head and Neck Cancer patients, leading to a growing number experiencing late effects, particularly dysphagia. Many returned to SLT services years post-discharge with worsening symptoms, highlighting the need for a structured approach to manage these cases effectively.

Following insights from the 2023 national Head and Neck SLT Cancer Clinical Excellence Network and a 2022 literature review, it became clear that patients often lacked knowledge on how to access support services. This prompted the development of a prototype 'late effects dysphagia clinic' at the Royal Glamorgan Hospital to enhance the SLT rehabilitation pathway

## AIM

The study focused on a cohort of patients experiencing late effects from head and neck cancer treatments. It aimed to evaluate the feasibility, acceptability, and impact of a targeted therapy intervention.

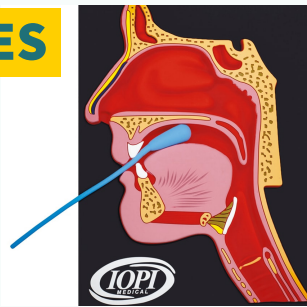
## METHOD

Selected 10 patients from existing caseloads and new referrals.

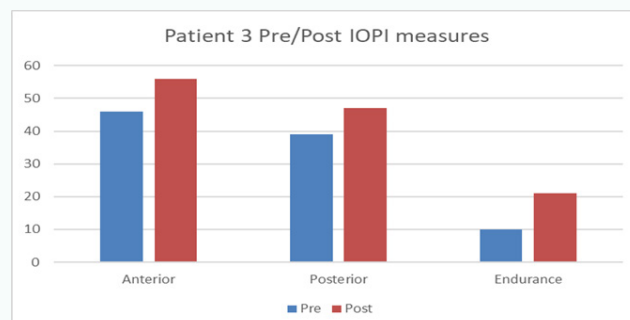
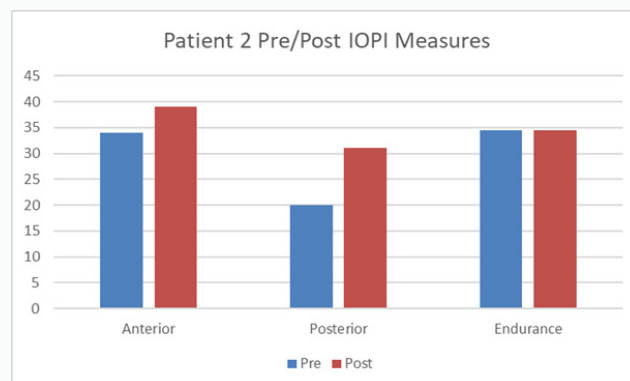
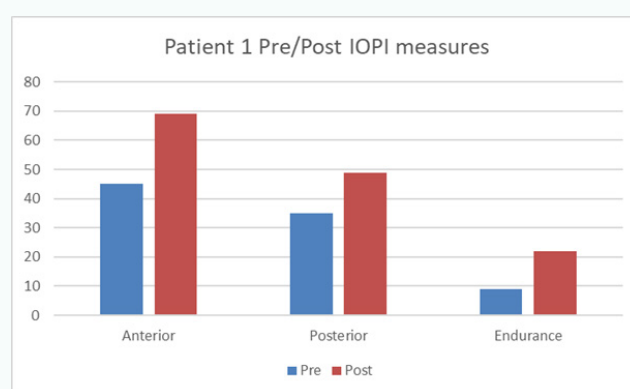
- Conducted initial assessments using patient-reported outcomes (PROMs), videofluoroscopy (VFSS) if needed, and provided education on dysphagia and treatment goals.  
 Outcome Measures Used:  
 PSS H&N Normalcy of Diet  
 PSS H&N Eating In Public  
 TOMS Wellbeing Scale
- Provided weekly therapy, including personalized programs and tools like the IOWA Oral Performance Instrument (IOPI) for biofeedback. Adjustments were made based on progress.
- Conducted a final assessment, including repeat VFSS and outcome measures to evaluate improvement.

## OUTCOMES

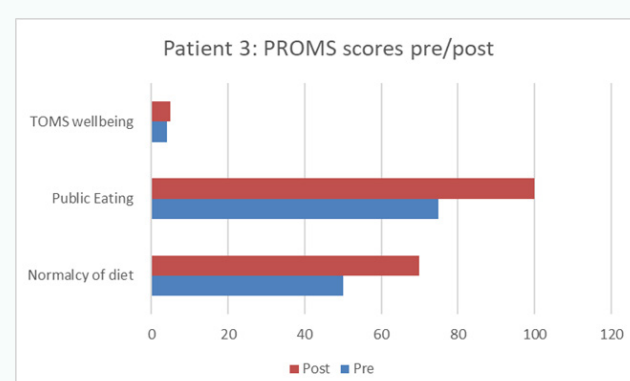
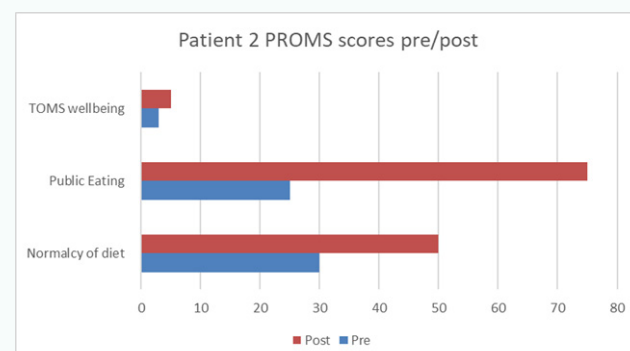
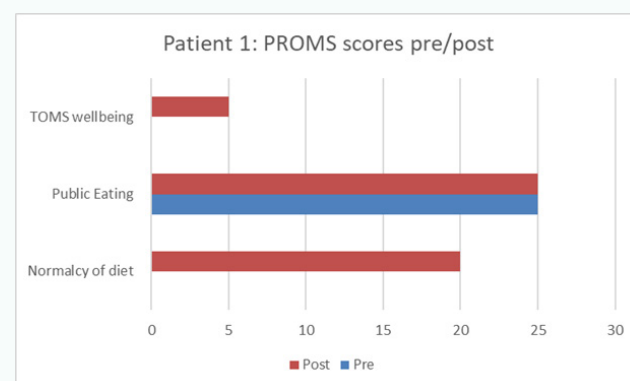
### QUANTITATIVE RESULTS



Improvements were seen in IOPI measures of tongue strength and endurance.



Enhancements were seen in PROMs and TOMS Wellbeing Scores.



“ I finish a meal more quickly”

“ I have a wider choice of meals now and less repetition”

“ My tongue moves more now – I think my speech is clearer too”

“ I cough less now and bring up less phlegm”

“I was suicidal now I don't want to die”

### QUALITATIVE RESULTS

Patients reported a variety of benefits, including quicker meal completion, wider meal choices, clearer speech, and reduced coughing. One patient specifically noted a significant positive change in quality of life.

### ADDITIONAL BENEFITS

- Development of a formalised late effects pathway.
- Early identification and management of recurrent disease became possible through a structured assessment process.
- Increased patient empowerment through education and self-management resources.
- VFSS helped 2 patients to make decisions regarding enteral feeding following support in understanding the issues around swallow efficiency and safety.

### CONCLUSIONS

The study showed positive results in terms of feasibility and patient outcomes, despite some patients not completing the full therapy block. The therapy led to improvements in tongue strength and endurance, as well as enhancements in patient-reported quality of life measures.

Those who did not complete the full format of the clinic and opted for support and advice also showed improvements in QOL via TOMS.

The development of a full discharge package with self management advice and maintenance exercises means that patients are now empowered and armed with information with the hope that those presenting with late effects may be less in the future.