People with PD may notice changes or difficulty with chewing, eating or swallowing. These changes can happen at any time, but they tend to increase as PD progresses. Common changes include:

- Slowness in eating
- A sensation that food is caught in the throat
- Coughing or choking while eating or drinking
- Difficulty swallowing pills and drooling.

How do I know if I have a Swallowing problem?

This self-assessment can help you determine if you have a swallowing problem. Carefully consider each statement below as it relates to you and your swallowing. Then, check those that apply to you.

- I have recently lost weight without trying
- I tend to avoid dinking liquids
- I get the sensation of food being stuck in my throat
- I notice food collecting around my gumline
- I tend to cough or choke before, during, or after eating or drinking.
- I often have heartburn or a sore throat
- I have trouble moving food to the back of my mouth
- I have trouble keeping food or liquid in my mouth
- It takes me a long time to eat a meal
- I sometimes have trouble swallowing pills
- My eating habits have changed recently or I have a loss of appetite
- I notice changes in my voice quality after eating or drinking.
If you checked any boxes above, you may need to see a speech-language pathologist for swallowing assessment. Your physician or other health care provider can help you with a referral.

*Carepartner Swallowing Survey*

This form is to be completed by the Carepartner regarding the person with PD. Consider each statement thoughtfully and check “yes” or “no” following each statement:

- S/he seems uninterested in food
- S/he coughs or gets “strangled” during meals
- S/he often coughs following a meal when we are doing other activities such as watching TV or reading.
- It takes him/her longer to eat a meal than it used to.
- Zs/he sounds “wet” or “gurgly” when s/he speaks.
- I have had to use the Heimlich Maneuver on the person I am helping.

Checked boxes are symptoms of chewing, swallowing or eating difficulties. Encourage the person with PD to seek referral for a swallowing evaluation by a qualified speech-language pathologist. Your physician or health care provider can help with a referral.

*How can I improve my swallowing?*

The following tips and techniques can help improve your eating chewing and swallowing.

- Always sit upright when eating, drinking and taking pills.
- Chew small amounts of food well and swallow it all before adding more.
- Put your fork down between bites to slow yourself down.
- Make yourself swallow twice after every bite.
- Take small sips when drinking. Alternate bites of food and sips. This helps clear food from the mouth and throat.
- Take only one sip at a time. Do not drink gulp after gulp.
Be wary of straws. Straws are useful when someone has severe tremors or dyskinesias, but can put too much liquid too far back too fast. Put the straw in the front of the mouth.

Keep your chin slightly down or at least parallel to the table. There is sometimes a tendency to lift the chin when drinking the last little bit of liquid in a cup or bottle. When the chin is raised, there is an increased risk of getting fluid in the lungs. Don’t try to drink out of a can. Use a glass instead.

Don’t talk with food in your mouth.

The types of food that you can eat can affect chewing and swallowing. Some foods such as raw vegetables, nuts, and peanut butter may be more difficult to chew or swallow. In general, foods which are moist, slippery, don’t crumble of fall apart and require less vigorous chewing are probably the best. A speech-language pathologist or registered dietitian can recommend foods and beverages that are easiest to swallow. An occupational therapist can recommend various types of helpful tools that can make eating a more pleasant experience.

What can I do about drooling?

If you tend to drool, you probably don’t have more saliva that you used to have; you are just not swallowing it as automatically as before. Frequent sips of water or sucking on ice chips during the day can help you swallow more often. Always keep your head up, with your chin parallel to the floor, and your lips closed when you are not talking or eating. Sugar tends to make more saliva in the mouth, so reducing sugar intake can be helpful.

Many people with PD complain that they have a thick phlegm or mucous in the throat. Drinking more water will help thin this phlegm. Drinking carbonated beverages or tea with lemon may also help. Eating or drinking dairy products can make phlegm worse.

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