

Poster presentations

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SWALLOWING/COMMUNICATION SCREENING IN OLDER ADULTS ATTENDING THE EMERGENCY DEPARTMENT AND ASSOCIATION WITH CLINICAL FRAILTY SCALE SCORES

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Background: Dysphagia, frailty and negative patient outcomes are interlinked¹. Changes in communication may result from the ageing process, chronic conditions, and/or neurologic conditions presenting in later years². However, unlike other cohorts, including stroke, frail older patients are not routinely screened for swallowing/communication difficulties in acute settings. We investigated the proportion of Speech and Language Therapy (SLT)

referrals generated for older patients attending our Emergency Department (ED) following use of a swallowing/communication screening tool and their association with Clinical Frailty Scale (CFS) scores.

Methods: A retrospective analysis of data collected over a four week period was completed. Older patients presenting to ED were screened by the interdisciplinary gerontological ED team using a screening tool, including a locally developed swallow/communication screen. Statistical analyses were performed using STATA Version 12.

Results: Of 176 patients screened (mean age 81.8 years, SD 5.9 years), median CFS score was 5 (IQR 3–6). Thirty-seven percent (66/176) of patients were referred for SLT assessment following initial screen. SLT referrals were more commonly required in patients with a CFS score of ≥ 4 (46.2% vs. 19.3%, $P=0.001$) and likelihood of requiring SLT referral increased with greater CFS score ($P<0.0001$).

Conclusion: Results suggest that screening for swallowing and communication difficulties in older patients yields a high level of SLT referrals, with a higher frequency of SLT referrals observed with increasing frailty scores. Further research is required to determine the optimum swallowing/communication screening tool in the acute setting. Future research will focus on evaluating outcomes of SLT assessments completed and determining the prevalence of swallowing and/or communication difficulties in this cohort.

References:

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2. Yorkston, K., Bourgeois, M. S. & Baylor, C. R. (2010). Communication and Ageing. *Physical Medicine and Rehabilitation Clinics of North America*, 21 (2), 309–319.