

Clinical outcomes before and after videofluoroscopic swallowing study in children up to 24 months old.

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Abstract

Purpose: To compare clinical outcomes associated with pediatric oropharyngeal dysphagia, before and after videofluoroscopic swallow study (VFSS) and feeding strategies recommendations. **Methods:** A longitudinal, analytical uncontrolled study with evaluation before and after VFSS was performed. Children between 0 and 24 months were included in the study. Each participant received recommendations for the therapeutic management of oropharyngeal dysphagia after the VFSS, as well as follow-up care at a hospital Outpatient Clinic for Pediatric Dysphagia in order to monitor feeding and swallowing complaints. The respiratory and feeding outcomes were compared. **Results:** A penetration/aspiration event was observed in 61% of the videofluoroscopic exams (n=72). Feeding strategies to improve biomechanical coordination and swallowing safety were required for 97% of the examined children. After the exam, there was a reduction in the use and length of antibiotic therapy (p=0.036), in the number of children who had been admitted to hospital (p<0.001), in the frequency (p=0.037), and in the length of hospitalization (p=0.025). There was an increase in combined oral and enteral feeding in relation to isolated feeding routes (p=0.002). **Conclusions:** This study data shows a high prevalence of penetration / aspiration in VFSS in this population. The therapeutic management of oropharyngeal dysphagia, guided by objective examinations, was associated with a decrease in respiratory morbidity in children included.

TITLE

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ABBREVIATED TITLE

Swallowing investigation and clinical outcomes.

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