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Dysphagia in a group of adult in-patients living with HIV /AIDS in Gauteng, South Africa.

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2012-07-03
http://hdl.handle.net/10539/11592

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ABSTRACT

Aims: The aims of this research were to describe the signs and symptoms of dysphagia in people who are living with HIV/AIDS and to see what participant variables such as CD4 count, age and diagnosis affect dysphagia.

Methods: This study was a descriptive, cross-sectional, quasi non-experimental design. The sampling method that was used for this research was non-probability and convenient. These patients were referred to the speech therapy and audiology department from various multidisciplinary team members for dysphagia assessments. There were 106 participants in total. Eighty participants underwent only a clinical bedside assessment and 26 underwent a bedside assessment as well as a modified barium swallow. The Mann Assessment of Swallowing Ability (MASA) was used to conduct the clinical bedside assessments and a modified barium swallow (MBS) was used as an objective measure. The data was analysed using both descriptive and inferential statistics. These tests included the Wilcoxon signed rank test, Spearman Rho test, Kruskal-Wallis and Mann Whitney U-test.

Results: Descriptively, the results revealed that participants with neurological conditions appeared to present with more severe signs and symptoms of dysphagia. The results from the Wilcoxon signed rank test showed that participants with a neurological disorder experienced more severe signs and symptoms of dysphagia, except with laryngeal elevation. The Wilcoxon signed rank test also showed that older participants experienced more dysarthria and oral transit difficulties. The results from the Kruskal-Wallis test highlighted that participants with a lower CD4 count had more significant respiration and voice difficulties. The results from the Mann-Whitney U test showed that participants who were on a HAART regimen experienced increased difficulty in the pharyngeal phase and aspirated more frequently. The Spearman-Rho test results showed that the MASA was seen as a valid bedside assessment tool for assessing adult dysphagia in an acute hospital setting.

Discussions: Dysphagia does occur in the HIV/AIDS population in South Africa in participants who have neurological conditions as well as opportunistic infections. The SLP needs to play a key role in the assessment and management of these patients. The MASA is a good assessment tool to use in settings where objective measures are not available.

Keywords: dysphagia – assessment - HIV/AIDS- speech language therapist/pathologist (SLT/P) – Mann Assessment of Swallowing Ability – Modified Barium Swallow – South Africa.