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Frequency, severity and awareness of dysphagia in people with Multiple Sclerosis: the DYSPHAMS study

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Introduction:

Recent studies indicate that even in people with multiple sclerosis (MS) with low disability, silent disease progression occurs. At present, few accurate markers able to predict disease progression proven reproducible.

Objectives/Aims:

To analyze this issue also from a clinical perspective, we investigated the frequency and severity of dysphagia in people with an apparently low to moderate disability (DisphaMS). Aim of the study is to investigate if dysphagia can be considered an early marker of disease progression.

Methods:

We recruited a sample of 86 individuals affected by MS according to McDonald 2017 revised criteria, who agreed to participate to the study project. Exclusion criteria were: severe cognitive or language disturbances, ongoing treatments for swallowing disturbances or any head or neck concomitant disease. Patients underwent to a specific evaluation by a speech therapist specialist by specific anamnesis, and by the following scales: “DYMUS” questionnaire, “DOSS”, “DysphAScale”, swallowing water test, test with standardized consistency foods (liquid IDDSI 0, semi-solid IDDSI 4, solid IDDSI 7). We calculated the frequency and severity of swallowing disturbances among included people. Scales used in the study were also compared for agreement and consistency. Finally, we considered the patient awareness of swallowing disturbances according to disturbance severity and to the disability measured by the EDSS.

Results:

53 out of the 86 recruited individuals (65%) were women; mean age for the whole sample was 50 years. Sixty-seven (nearly 80%) had some degrees of swallowing disturbances while had 31% of them had a subclinical disturbance and 25% a borderline swallowing ability. Only 26% of people were aware of having dysphagia while the others were only partially aware (33%) or not aware at all (41%). Overall, the correspondence the DOSS and DYMUS scales comparisons showed low levels of concordance (i.e. 58% at risk for dysphagia according to DYMUS, whilst 98% of them were clearly affected according to DOSS scale).

Conclusion:

Our study showed a high frequency of swallowing disturbances among people with MS. The Dysphascale indicated indeed a low level of awareness. The present study suggests that even dysphagia could be considered an early marker of silent progression, and need therefore to be early recognized to anticipate its diagnosis and care.

Disclosures:

All of the authors declare that they have nothing to disclose with regard to the present project