

Pharyngeal electrical stimulation for neurogenic dysphagia

Information for the public

Published: 23 January 2024

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Neurogenic dysphagia is difficulty swallowing (dysphagia) caused by conditions that affect the nervous system (neurogenic), for example, stroke, multiple sclerosis and Parkinson's. It can also be caused by major head and neck surgery (for example, to remove cancer), trauma and intensive care treatment (intubation and tracheostomy). Dysphagia can cause coughing and choking. Food, drink or saliva may go into the lungs (aspiration), which can lead to chest infections. People with severe dysphagia may need a tracheostomy to help prevent saliva going into the lungs. A tracheostomy is an opening created at the front of the neck so a tube can be inserted into the windpipe (trachea).

In this procedure, a tube is passed through the nose and into the throat (pharyngeal) where it is used to deliver small amounts of electrical current. The current travels from the throat to the brain and stimulates the areas involved in swallowing. The aim is to reduce aspiration and improve quality of life.

Neurogenic dysphagia after a stroke and tracheostomy

There is not enough clear evidence about all of the benefits of this procedure for people with neurogenic dysphagia who have a tracheostomy after a stroke. So, it can only be done with special arrangements. This means you will have regular appointments afterwards to check how well it is working or if it has caused problems.

Neurogenic dysphagia after a stroke without a tracheostomy and other causes of neurogenic dysphagia

This procedure can only be done as part of a research study for people with neurogenic dysphagia after a stroke who do not have a tracheostomy and for people with other causes of neurogenic dysphagia. This is because there is not enough clear evidence to be sure how well it works for people with neurogenic dysphagia after a stroke without a tracheostomy and there is not enough evidence for people with other causes of neurogenic dysphagia.

Your healthcare professional should talk to you about the research.

Is this procedure right for me?

You should be included in [making decisions about your care](#).

Your healthcare professionals should explain the risks and benefits of this procedure and how it is done. They should discuss your options and listen carefully to your views and concerns. They should offer you more information about the procedure. Your family or carers can be involved if you want or need them to be.

You will be asked to decide whether you agree (consent) to have the procedure. Find out more about [giving consent to treatment on the NHS website](#).

Some questions to think about

- How many appointments will I need?
- What are the possible benefits? How likely am I to get them?
- What are the risks or side effects? How likely are they?
- Will I have to stay in hospital?
- What happens if it does not work or something goes wrong?
- What happens if I do not want the procedure?
- Are other treatments available?

Information and support

The [NHS webpage on dysphagia](#) may be a good place to find out more.

You can [search the NHS website for information about consultants and hospitals](#) that offer this procedure for people with neurogenic dysphagia who have a tracheostomy after a stroke.

- [NICE's information on interventional procedures guidance](#) explains what an interventional procedure is and how we assess it.
- [NICE's information on interventional procedures recommendations](#) explains what special arrangements are and what only in research means.

You can also get support from your local [Healthwatch](#).

ISBN: 978-1-4731-5655-5