Feeding and swallowing disorders in children with cerebral palsy: presence and severity

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Introduction: Feeding and swallowing disorders (FSD) are common among children with cerebral palsy (CP) and have a high potential for morbidity-related complications and death. Objective: To determine presence, severity and characteristics of FSD in a group of children with CP, of both genders, GMFCS I to V, between 3 and 6 years. Patients and Methods: 50 patients underwent 4 assessments: 1) description of clinical characteristics of CP; 2) clinical swallowing evaluation; 3) videofluoroscopic swallowing study; and 4) determination of presence and severity of FSD. Results: there was male predominance, with an average age of 5 years, 78% GMFCS III to V. Bilateral motor involvement, mixed motor symptoms and signs, and hypotonic axial muscles predominated. The presence of a FSD was high, either considered in general (98% of children) or considered only for solid food (98%) or liquids (96%). In all cases, FSD was most common in children with more motor involvement. All swallowing phases were affected in different proportions, especially with solid food. Recognizing normal cases from affected ones is best when using several assessing tools (5% of children were normal when Campora scale was used, 1% according to EDACS and 5% using videofluoroscopy). The perception of FSD was reduced in both the caregiver and the medical team. Conclusions: FSD are frequent in CP. All GMFCS levels can be affected, especially those including more motor involvement. Swallowing phases were all altered, mainly pre-oral stage for solid food. Complementing several assessing tools seems to be the best way when approaching to CP children with FSD.

Key words: Feeding, swallowing, cerebral palsy