

M 35 Presentation:

Oral presentation

Title:

Screening for oropharyngeal dysphagia using the EAT-10 screening tool is associated with hand grip strength in the elderly

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Abstract:

Objective:

Screening for oropharyngeal dysphagia in the elderly using the Dutch EAT-10 screening tool. Assessment of the relation between the EAT-10 screening tool and functionality as well as the nutritional status and comorbidities.

Method:

Patients ≥ 65 years admitted to the Geriatric ward of the ZNA hospitals are eligible for inclusion in this study. The exclusion criteria consist of head and neck tumours, acute cerebrovascular accident < 3 months and inability to complete the EAT-10 screening tool. The functionality is assessed using the SARC-F, hand grip strength and SPPB. The nutritional status is determined by the MNA-SF and comorbidity is assessed using the CIRS-G.

Results:

A weak but significant negative correlation was shown between the EAT-10 screening tool and hand grip strength when categorized ($\rho = -0.169$, $p = 0.029$) using the EWGSOP2 cut-off values. No correlation was found between the EAT-10 screening tool and MNA-SF. In regards to comorbidities, a weak but significant correlation was found between the EAT-10 screening tool and CIRS-G ($\rho = 0.140$, $p = 0.048$) with a significant predictive effect of the EAT-10 on CIRS-G ($p = 0.001$). However, this effect accounted only for 5% (formula: $\text{CIRS-G} = 13.13 + 0.24 * \text{EAT-10}$).

Conclusion:

Preliminary data showed a remarkable correlation between the EAT-10 screening tool and hand grip strength. A weak but significant negative correlation was found suggesting the interaction of sarcopenia with the deglutition process, which includes a complex interaction of dozens of muscles. Further elaboration of the muscles involved in the deglutition process would clarify this notable link.