

Preliminary findings from a prospective cohort study of patients, including with Head and Neck Cancer (HNC), accessing a novel community Fiberoptic Endoscopic Evaluation of Swallowing (FEES) service led by Midwest Community Healthcare (MWCH) Speech and Language Therapy (SLT)

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Background:

HNC is a risk factor for dysphagia. Appropriately timed dysphagia management, incorporating instrumental swallowing assessment, is important for improving patient outcomes. FEES is a gold standard instrumental tool both in terms of cost and clinical effectiveness. It supports assessment, treatment, and prevention. The aim is to present preliminary results relating to HNC patients participating in a prospective cohort study of patients using a novel community FEES service established by SLT in the Midwest in 2022.

Methods:

All patients referred for community FEES were invited to participate in the ongoing prospective cohort study. Demographic data, process data, patient reported outcome measures and physiologic rating scales were recorded at the index visit. A structured phone interview was completed at six months post index visit.

Results:

Results are pending full analysis, however provisionally they indicate that HNC patients referred for community FEES experience significant dysphagia, reduced health-related quality of life and poor functional outcomes.

Conclusion:

These preliminary findings advance our understanding of the clinical profiles and outcomes of people with HNC who have had a community FEES over the last 12 months. The results help us to understand the gaps in the care pathway for service users with HNC in the Mid-West.