

# Eating, drinking and swallowing

A guide for carers of people living with a dementia



When a person is living with a dementia they may experience difficulties with eating and drinking. As dementia progresses, swallowing difficulties (sometimes called dysphagia) become more common.

Eating, drinking and swallowing are complex processes and poor coordination of the swallow can result in food or drink entering the lungs instead of the stomach, potentially leading to chest infections or pneumonia. If the person is unable to eat or drink adequately this can lead to weight loss or dehydration, which can worsen the symptoms of dementia.

The person's ability to communicate that they are hungry or thirsty may be reduced. Food and fluid intake needs to be monitored on a daily basis to ensure it is adequate.

If you notice the person's eating and drinking habits changing over a period of time it may be due to:

- apathy;
- progression of dementia;
- swallowing difficulties;
- depression or anxiety;
- loss of appetite;
- lack of physical activity.

If there is a sudden change in the person's eating and drinking it may be due to:

- an oral or dental infection;
- a urinary/kidney infection or chest infection;
- medication;
- pain;
- tiredness;
- constipation.

This booklet aims to provide you with information on how the eating, drinking and swallowing of a person with a dementia may be affected. It includes sections on:

**Memory and concentration**

**Coordination**

**Swallowing**

**Behaviours displayed at mealtimes**

**Not everyone with a dementia will experience all of these difficulties.**

### **Helpful hints**

Before a person with a dementia eats or drinks, ensure:

- the environment where the person eats and drinks is as calm and relaxing as possible, without excess noise and distractions;
- that dentures, glasses and hearing aids are worn as needed;
- the table is free from any unnecessary items;
- the person is sitting as upright as possible to encourage them to be alert;
- that you use colour contrast to help the person see their food - the colour of the food, plate and table should be different; for example, do not put fish, cauliflower and potatoes on a white plate;
- don't overload the plate, too much food can be off putting;
- avoid using patterned plates or tablecloths;
- that you serve one course at a time.

## Memory and concentration

A person with a dementia often has difficulties concentrating and sitting at a table for the duration of a meal. It could wrongly be assumed that the person is finished or not hungry.

### Helpful hints

- Try to find out if the person prefers to eat alone or in company as this can help with encouraging eating.
- Encourage the person to go to the table only when the meal is ready so they do not have to wait.
- Direct the person's attention to the food.
- Put the cutlery or cup in their hand (if needed) or guide them to take the first mouthful.
- If necessary, feed the first mouthful and then try to encourage them to feed themselves.
- Give reminders to swallow each mouthful as needed.
- Use gentle physical prompts, like putting the cutlery or cup back in the person's hands.
- Use cutlery aids if necessary.
- If they leave the table gently guide them back and prompt them to continue.
- If they forget that they have already eaten or are concerned about where the next meal is coming from, reassure the person and provide them with a snack if appropriate.
- Eat with them. This will make eating a social activity and can help the person maintain their independence as they may copy what you are doing.
- If the person is unable to feed themselves with your guidance, as a last resort consider feeding them part or all of the meal.



## Coordination

A person with a dementia often has difficulty feeding themselves. It is however important to encourage independence as this helps the swallow process.

### Helpful hints

- Cut food up before presenting it.
- Only give the person the cutlery required.
- Put the cutlery or cup directly into the person's hand.
- Use plates and tablecloths of contrasting colours.
- Ensure the table is free from any unnecessary items.
- Serve one course at a time.
- Consider use of finger foods like sandwiches, slices of fruit or vegetables and cheese.
- Use gentle verbal encouragement, for example "Oh this smells lovely".
- Use gentle physical prompts, for example place your hand over the person's hand to guide their food or drink to their mouth.
- Only as a last resort consider feeding them part or all of the meal.
- Many people will still be able to hold a cup after the ability to use a fork or spoon has been lost, and this should be encouraged.



# Swallowing

A person with a dementia may have difficulty with some types of food and fluids, such as spitting out lumps or holding food in the mouth.

## Helpful hints

- Give a soft, moist diet. Avoid hard, dry or fibrous foods that need a lot of chewing like steak, bacon, wheaten bread and pineapple.
- Use gravy or sauces to moisten food.
- Encourage small sips of fluids.



**If the person is persistently coughing or choking when eating and/or drinking please contact your GP for advice as a speech and language therapy assessment may be required.**

If the person is having difficulty with swallowing tablets please talk to your GP or local pharmacy to explore alternatives.

## Helpful hints if the person is spitting out lumps

- Avoid foods with lumps/bits/mixed textures like crumbly biscuits, soup with bits, cereals with cold milk, food with skins or pips.
- Ensure food is soft or smooth in consistency throughout.

## Helpful hints if the person forgets to swallow

- Alternate temperature and taste within a meal, for example sweet and savoury food or hot and very cold foods or fluids.
- Offer sips of ice cold drink prior to a meal or in between mouthfuls.
- Give verbal prompts to swallow.
- Try placing an empty spoon in the mouth between mouthfuls to help stimulate a swallow.

## Helpful hints if food remains in the mouth at the end of a meal

- Check mouth after each meal and encourage or provide regular teeth brushing or denture cleaning, as food left in the mouth can cause mouth infections and bad breath.
- The person should remain upright for a short time.
- If food remains in the mouth despite these attempts to encourage a swallow, you should safely attempt to remove it.



## Behaviours displayed at mealtimes

A person with a dementia often displays changes in behaviours at meal times.

### Helpful hints if the person refuses food or drink

- Encourage the person to try the first mouthful to get a taste.
- Use prompts, for example “that’s nice”.
- If the person opens their mouth to a cup more readily than to a spoon, try a few mouthfuls of fluid first, then move on to the spoon.
- Encourage the person to feed themselves as much as possible, even if this is messy.
- Experiment with different tastes and textures. People with dementia often have a preference for sweet foods; sweeten meals by adding sugar, maple syrup, or ketchup.



**A person with a dementia may misinterpret household items as food and attempt to eat or drink these placing them at high risk of choking or other health issues for example tissues, buttons or liquid tabs.**

### Helpful hints if the person eats non-food items

- Ensure everyone involved in the person's care is aware of this including visitors.
- Lock away all harmful substances like cleaning products.
- Be vigilant and remove small items that may be easily placed in mouth.
- The person may be hungry. Offer food as an alternative to the item.
- Ensure food is available and easily accessible throughout the day so that the person can eat what and when they want to safely.
- Reheat food if necessary if the person is taking a while to eat their food.



## Helpful hints if the person's food preferences change

A person with a dementia may develop a preference for sweeter foods. It is important to offer a person with a dementia a choice of foods if practical.

- If the person has a preference for sweet foods, try sprinkling sugar on foods before or after cooking. Honey, jam, syrup and fresh fruit can be used in savoury dishes to add a sweet flavour.
- Sweet toppings can be used in certain savoury dishes, for example sweet pastry on vegetables, meat or fish pies and crumbles.
- Try savoury dishes already containing a sweet flavour, like sweet and sour sauces, pork and apple in cider sauce, barbecue sauces, honey glazed ham, gammon and pineapple and sweeter curries.
- Try adding strong tasting sauces such as ketchup or sweet chilli sauce to food. These should be tested out in small quantities in order to identify likes and dislikes.
- Herbs and spices can be used to enhance flavours.
- Try using strong flavoured dips like garlic mayo, barbeque sauce, tomato sauce or brown sauce if the person does not like gravy.

## Helpful hints if the person is over filling their mouth with food

- Cut all food into small pieces before presenting it.
- Encourage the person to take small mouthfuls and eat at a slower rate.
- Use smaller items of cutlery, like a teaspoon or dessert fork.
- Encourage the person to put their cutlery down and chew or swallow.
- A gentle hand on the arm with a verbal prompt may help, such as “take your time.”
- Offer a soft, moist diet.
- Offer smaller servings at one time.
- Reheat food if necessary if the person is taking a while to eat their food.



**Cramming food into the mouth can place a person at risk of choking. If coughing or choking occurs, discuss with GP. If the person coughing or choking persistently, contact your GP as a speech and language therapy assessment may be required.**

## Helpful hints to encourage appetite

- Encourage the person to get involved in mealtimes by helping to prepare the food or lay the table if possible.
- Make food look and smell appealing. Use different tastes, colours and smells.
- If food is pureed, each element (like meat, potatoes and vegetables) should be pureed and served separately on the plate.
- Offer regular small meals or snacks. Encourage the person to eat when they are at their best and in good form.
- Food should be placed close to the middle of the plate.
- Do not overfill plate.
- Serve each course separately to retain heat and keep food appetising
- If the person is not going to finish their dinner, offer dessert.
- If it appears that the person has visual problems, try turning the plate around or moving the plate.
- If the person is waking up at night it may be because they are hungry. Discuss with your GP if this becomes a pattern.



# General advice

- Feed only when alert enough to swallow safely.
- Be as relaxed and flexible as possible when sitting down to assist a person with a dementia to eat and drink.
- Create a calm environment and use a calm approach; avoid rushing the person.
- Avoid interruptions and distractions.
- Give encouragement, tell the person about their food.
- Sit facing the person, or slightly to their side so that you can make eye contact.
- Place the food where the person can see it.
- Presentation is important – make the food look attractive to eat even if it is pureed.
- Encourage all attempts to feed themselves no matter how messy.
- Assist where necessary but do not force.
- Give prompts to chew and swallow.
- Watch closely and wait for each swallow. Only give another mouthful when they have swallowed.
- If a person with a dementia is going to a family party, if possible they should be included as much as possible in the meal and event. However, if you feel this is going to cause anxiety for the person, a small meal at home before the event in the environment that best suits their needs can be a good idea.
- Regular mouth care (tooth brushing and denture cleaning) is important.
- Consider the use of denture fixative for loose dentures.
- Refer to dentist if concerned.
- Everyone needs oral hygiene even if they have no teeth.
- If drowsy and/or increasingly confused rule out any physical illness, for example urinary or chest infection, etc.
- Consider the effects of any medications. Talk to your GP and pharmacist for advice.

If you have any other concerns please discuss these with your GP who can refer you to a relevant professional, which may include:

- Dietitian
- Physiotherapist
- Occupational therapist
- Speech and language therapist

# Useful contacts

## **Alzheimer's Society**

Unit 4  
Balmoral Business Park  
Boucher Crescent  
Belfast  
BT12 6HU  
Tel: 028 9038 7770  
[www.alzheimers.org.uk](http://www.alzheimers.org.uk)

## **Age NI**

3 Lower Crescent  
Belfast  
BT7 1NR  
Tel: 08088087575  
[www.ageuk.org.uk/northern-ireland](http://www.ageuk.org.uk/northern-ireland)

## **Dementia Services Development Centre**

University of Stirling  
[www.dementia.stir.ac.uk](http://www.dementia.stir.ac.uk)  
Tel: 01786 467740

## **Carers Northern Ireland**

58 Howard Street  
Belfast  
BT1 6PJ  
Tel: 028 9043 9843

## **Northern Ireland Health and Social Care Interpreting Service**

Business Services Organisation  
Franklin Street  
Belfast  
BT2 8DQ  
Tel 028 9536 3777

## **Dementia NI**

54 Elmwood Avenue  
Belfast  
BT9 6AZ  
Tel: 02890 68 67 68  
Email: [info@dementiani.org](mailto:info@dementiani.org)  
[www.dementiani.org](http://www.dementiani.org)

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# Mealtime memo

**Make sure I am comfortable, in a good position and not in pain.**

**Find out what I like because everyone has different tastes.**

**Appetising smells and good presentation help me enjoy my food.**

**Let me feed myself if possible, but help me if I need it.**

**Tell me what I am eating and go at my pace.**

**I like a calm environment without clutter, clatter and chatter.**

**Modify the consistencies to suit me.**

**Eat with me when you can.**





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12-22 Linenhall Street, Belfast BT2 8BS.  
Tel: 0300 555 0114 (local rate).  
[www.publichealth.hscni.net](http://www.publichealth.hscni.net)

