Correlation between brain injury and dysphagia in adult patients with stroke

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Nunes MC. Correlation between brain injury and dysphagia in adult patients with stroke [dissertation]. Curitiba: Universidade Tuiuti do Paraná; 2011.

Purpose: To correlate brain injury and dysphagia in patients with stroke diagnosis, considering the type of stroke, location of the lesion and anatomical region. Methods: Cross-sectional study conducted at the General Hospital - UFPR with 30 stroke patients, 18 female and 12 male. All patients underwent a swallowing clinical evaluation and fiberoptic endoscopic evaluation of swallowing (FEES®), and were divided according to location of the lesion: cerebral cortex, cerebellar cortex, and subcortical areas, and type of stroke: hemorrhagic, ischemic or transient. **Results:** From the 30 subjects, 18 had ischemic stroke, two hemorrhagic and ten transient. As for location, ten showed lesion in cerebral cortex, three in cerebral and cerebellar cortices, three in cerebral cortex and subcortical area, one in cerebral and cerebellar cortices and subcortical area, and three in subcortical area. Clinical evaluation showed a predominance

of oral dysphagia in patients with ischemic lesion in cerebral cortex and subcortical area. FOIS® showed a predominance of level 7 in ischemic lesion in cerebral cortex. FEES® showed a decrease of laryngeal sensitivity in ischemic lesion in cerebral cortex. Residue in epiglottic valleculae associated to pyriform sinus predominated in cerebral cortex for all consistencies and ischemic type. One patient with cerebral and cerebellar cortices lesion, ischemic type, showed larvngeal penetration and tracheal aspiration with liquid and honey consistencies. In the Severity Scale: Penetration and Aspiration, prevailed score 1 in patients with ischemic cerebral cortex lesion. Conclusion: There was a prevalence of dysphagia in location of lesion in cerebral cortex and ischemic type.

Study conducted at the Graduate Program (Masters degree) in Communication Disorders, Universidade Tuiuti do Paraná - UTP - Curitiba, Brazil, for obtention of Masters degree in Communication Disorders, under supervision of Professor Ari Leon Jurkiewicz, PhD, and Rosane Sampaio Santos, Ms. (1) Graduate Program (Masters degree) in Communication Disorders, Universidade Tuiuti do Paraná - UTP - Curitiba, Brazil.

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