Coughing when eating and drinking

How carers and nurses can support people who are coughing when they are eating and drinking

What is a cough?

Coughing is an essential, natural protection mechanism that is not always a sign of swallowing difficulty (dysphagia). Coughing may occur when food or drinks go in or near the airway when swallowing is less co-ordinated, and coughing can help prevent food or drink entering the lungs. However, coughing may also occur if the throat is irritated, or with a viral illness / common cold, or a medical / respiratory condition such as COPD.

Remember coughing is not the same as choking. Choking is a medical emergency where the airway is blocked and the person cannot speak, cough, or breathe, and they need immediate intervention (backslaps alternated with abdominal thrusts, followed by Basic Life Support while awaiting emergency services if they become unresponsive).

What to do if coughing only happens with food and / or drink:

If coughing is intermittent, occasional, not distressing and not causing chest infections, then:

- continue usual food & drink;
- ensure best practice is followed at mealtimes. *(See Leaflet 1: Good Practice supporting patients at mealtimes);*
- give excellent mouth care after each meal. *(See Leaflet 4: Mouth Care);*
- There is no need to thicken drinks when coughing is infrequent and is not causing chest infections;
- Remember, good mouth care is the most important action for preventing chest infections.

However, if coughing only occurs when eating and drinking, not at other times of the day, AND:

1. is happening frequently (many times per meal / drink);
2. has persisted for several weeks, and shows no sign of improving;
3. does not improve by sitting fully upright for food & drink, taking small, single mouthfuls & sips;
4. causes distress to the patient;
5. or there is a current chest infection, or recent history of chest infections, with no other cause.

- **Then discuss with the GP to see if a referral to SaLT is appropriate.**

Thickened drinks:

Thickening drinks is only appropriate for patients who have a swallow difficulty (dysphagia) with frequent and persistent coughing that is causing (or likely to cause) chest infections, or where excessive coughing is causing distress.

This is because there are advantages and disadvantages to thickened drinks, so the use of thickeners should be carefully considered and balanced with potential risks.

Thickened drinks can help swallowing as:

- Thicker drinks move more slowly in the mouth;
- They can reduce or prevent drooling;
- They allow time for the mouth muscles to start a coordinated swallow;
- They can make it easier to swallow tablets and medication.

Remember that some drinks are naturally thicker such as smoothies, milkshakes, hot chocolate and some juices (e.g. mango or pear juice). Some patients may prefer these kind of drinks.

Thickened drinks can cause problems as:

- They can sometimes be difficult to mix to the right level of thickness without lumps;
- They can become thicker (too thick) over time;
- Patients don't always like the taste or texture and so may be refused;
- Reduced intake of thickened drinks gives a risk of dehydration and complications (e.g. UTIs);
- Thicker drinks may leave more residue in the throat and may be more difficult to cough out;
- Any aspiration of thickened drinks into the lungs may cause problems;
- They can be associated with constipation, diarrhoea, and may delay or reduce the absorption of some medications.

Therefore, the use of thickeners should be carefully considered and balanced with the severity of the swallowing problem, any potential benefits, the risk of harm, and the impact on emotional wellbeing and quality of life.

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