

## Letter to the editor

# Dysphagia in the elderly in long-stay institutions - a systematic literature review

Edênia da Cunha Menezes<sup>1</sup><https://orcid.org/0000-0001-8889-8457>

<sup>1</sup> Universidade Federal de Sergipe - UFS, São Cristóvão, Sergipe, Brasil.

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Comments on the article “Dysphagia in the elderly in long-stay institutions - a systematic literature Review”, prepared by Menezes EC, Santos BP, Andrade MJC. Revista CEFAC. 2018;20(1):123-30. This paper aimed at reviewing aspects of swallowing and risk indicators of dysphagia in the elderly. The study sought to verify in the literature, through a systematic review, the dietary conditions of the elderly enrolled in long-stay institutions, considering the general care and agents that potentiate dysphagia in this population.

First, I apologize for the lack of clarity regarding the methodological aspects of the work. I will present the questions / demands mentioned in the letter to the editors:

1. The descriptors used were in English and Portuguese, but it is common in publications not to present descriptors in Portuguese, neither the synonyms that are used to carry the research. I would like to inform that the descriptors in Portuguese were geriatria, envelhecimento, deglutição e desordens da deglutição.
2. I follow the principles of systematic reviews, where *only studies with levels of evidence 1 and 2 should be selected*.
3. Regarding the placement of the authors that there are no endpoints of interest, in order to clarify, I inform that the outcomes aimed at pointing out risk factors for dysphagia in the elderly in institutions of long stay, mentioned earlier in the introduction of the article entitled, Dysphagia in elderly people in long-term institutions – a systematic literature review.
  - a. Behavior of the elderly,
  - b. Dental changes,
  - c. Inadequate consistency of food,
  - d. Posture and improper positioning during feeding,
  - e. Fast food offer by caregiver,
  - f. Cognitive, neurological, physical, and environmental changes,
  - g. Lack of adequate oral hygiene.

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**Corresponding address:**

Edênia da Cunha Menezes  
Praça Etelvino Mendonça, 359  
CEP: 49500-097 – Itabaiana, Sergipe,  
Brasil  
E-mail: [edeniamenezes@gmail.com](mailto:edeniamenezes@gmail.com)

At this point, in the review of literature, and conclusion, I emphasize that the risk factors preponderant to the favoring of dysphagia in the selected studies were the lack of adequate oral hygiene, inappropriate posture during feeding and the supply method. Therefore, I included studies that comprehended a questionnaire for managers or employees, but included studies with the elderly<sup>1-3</sup>, as follows:

- Furkim AM, Duarte ST, Hildebrandt PT, Rodrigues KA. The asylum as worsening factor for dysphagia. *Rev. CEFAC*. 2010;12(6):954-63.
- de Oliveira JP, Marcolino JF, de Andrade MS. A formação do cuidador de idosos institucionalizados: Ênfase na rotina de alimentação. *Estudos interdisciplinares sobre o envelhecimento*. 2011;16(2):199-214.

Since it is a study of risk factors for dysphagia in the elderly, I consider that we followed a linearity in order to score important aspects about the dynamics of long-stay institutions. Finally, the considerations presented in the letter to the editor are of great importance, demonstrating the need to be more rigorous in the development of future systematic reviews, including the registration procedure in the Prospero (International Prospective Register of Systematic Reviews).

## REFERENCES

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