



**ASPIRATION
AND
PNEUMONIA**

ASPIRATION

Aspiration occurs when a substance that should not be in the lungs, gets into the lungs.

When substances do get into the lungs, they are normally cleared and cause no problems. However, any substance can cause:

- damage to the lung tissue due to a toxic effect
- an infection
- blockage of the airway

CATEGORIES OF ASPIRATION

ASPIRATION FALLS INTO 2 CATEGORIES:

- coming from above (swallowing problems) →
- coming from below (gastroesophageal reflux)



SIGNS OF CHRONIC ASPIRATION



Chronic cough
Wheezing
Noisy breathing
Chest discomfort



Excessive throat clearing
Sore throat
Recurrent vomiting



Choking, coughing, spitting when eating.
Hoarseness, gurgly sounding voice when eating.



Fever, chills, excessive sweating
Trouble breathing, turning blue
Recurrent pneumonia

RISKS FOR ASPIRATION - 1

1. Decreased consciousness:

decreases the ability to cough and close off airways.

Factors include:

- Seizures
- Head trauma
- Anesthesia
- Excessive fatigue
- Sedating drugs

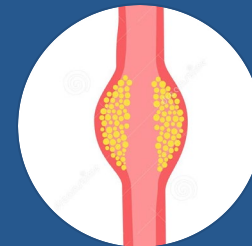


RISKS FOR ASPIRATION - 2

2. Dysphagia: difficulty swallowing

Swallowing disorders may be due to:

- Narrowing (strictures) of esophagus
- Gastric reflux
- Tumors or cancer
- Head and neck injuries
- Surgery of upper airways/esophagus
- Loss of muscle tone or coordination



RISKS FOR ASPIRATION - 3 & 4

3. Neurological deficits:

- Stroke
- Parkinson's
- Multiple sclerosis



4. Mechanical disruption:

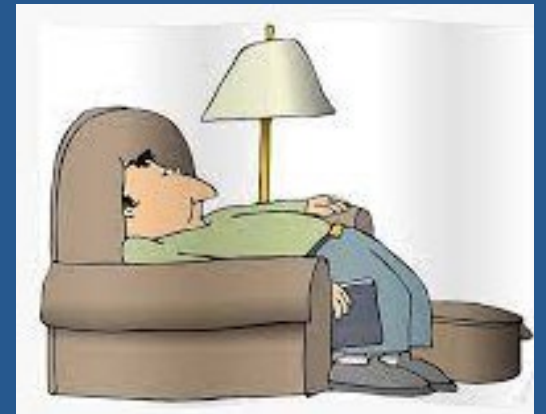
- Tracheostomy
- Bronchoscopy
- Upper endoscopy
- Nasogastric feeding tube



RISKS FOR ASPIRATION - 5

5. Miscellaneous:

- Eating or drinking too fast
- Lying down or slouching while or right after eating
- Prolonged vomiting
- Near-drowning
- Large volume tube feeding feeding via G-tube



PREVENTION

1. Management of dysphagia:

a. Positioning:

- Sit upright, in good alignment
- Head: neck extended with chin barely tucked
- Stay upright after eating for 20-60 minutes

b. Behavior:

- Eat slowly/allow adequate time to eat
- No goofing off, etc. while eating
- Keep environment calm and relaxed
- Small bites, sips between bites



PREVENTION -continued

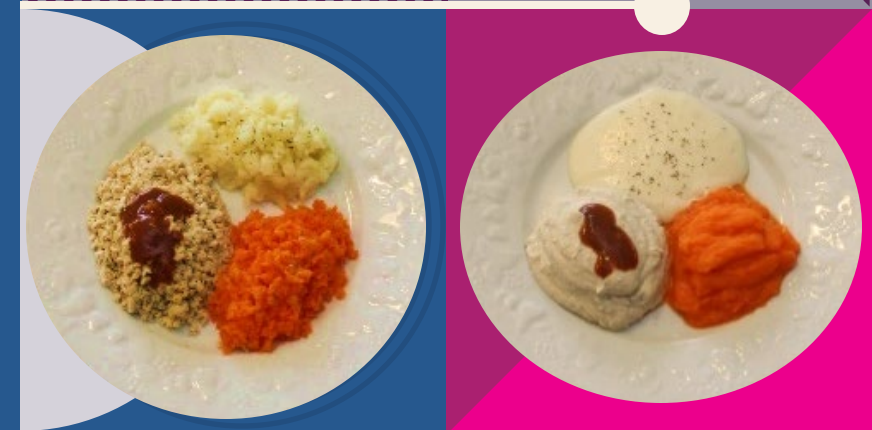
Management of dysphagia:

c. Diet:

- Soft moist foods
- Follow specific diet protocol for chopped, ground, pureed diets, etc.
- Thickeners if indicated/ordered

d. Tube feeding:

- Gastric or nasal tube feedings are efficient for delivering nutrition and medications but have not been shown to reduce the incidence of aspiration pneumonia and may contribute to worse problems.



PREVENTION - 2

2. Oral hygiene:

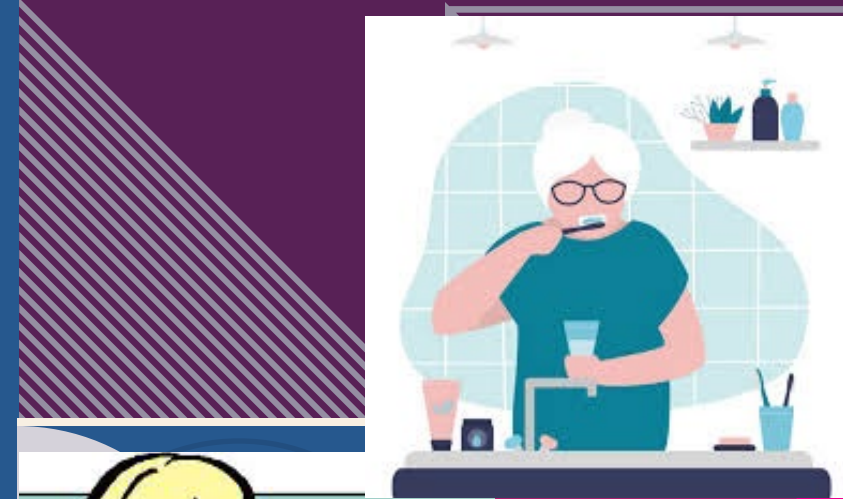
- a. Missing teeth, lack of teeth, or poorly fitting dentures can cause chewing and swallowing difficulties.
- b. Poor oral hygiene/periodontal disease causes an increase in mouth flora/pathogens that can cause pneumonia when aspirated.



PREVENTION - 2. continued

Oral hygiene

- c. Daily oral hygiene reduces risk for aspiration pneumonia:
- Brush after meals and before bed
 - Rinse with mouthwash
 - Do not use sponges to swab mouth as they do not decrease bacterial load
 - Encourage fluid intake to keep mouth moist
 - Stop smoking as smoking causes a dry mouth





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Thank you
Jean Justad, MD, Medical Director, DDP
2023