An Interdisciplinary Model for Cough and Secretion Assessment in MND

Relevant NG 42 recommendations

Section 1.5 Organisation of Care, sections 1.8.10-1.8.15 saliva problems, 1.10.-1.10.10 swallowing and gastrostomy, and 1.13 cough effectiveness

Background and aims

53% of patients referred to physiotherapy had primary needs associated with unmanaged dysphagia and/or oral secretion management, highlighting the importance of SLT input.

Aim: To test a joint Speech and Language Therapy (SLT) and Physiotherapy (PT) approach to cough assessment for airway clearance to see if it altered:

- The clinical management.
- And experience of patients with MND.

Evaluation

100% felt all their cough and secretion needs were met.

50% said assessment and management went 'above and beyond' their expectations.

100% felt listened to and would recommend the model to other patients.

The model has allowed us to share expertise and support colleagues in non-specialist settings to minimise symptoms and distress caused by an inability to clear secretions with an overall aim to optimise quality of life.





University College London Hospitals

Authors: Jodi Allen, Senior Speech & Language Therapist Email: jodi.allen@nhs.net and Charlotte Massey, Highly Specialist Physiotherapist, Email: charlotte.massey3@nhs.net

Method

Launch of an interdisciplinary SLT and PT clinic, with associated referral pathway and criteria on our elective inpatient neuromuscular unit.

Patients referred to physiotherapy for airway clearance jointly assessed by SLT and PT over a twelve-month period.



Primary issues impacting airway clearance were identified and addressed in a hierarchical order, tailored to individual circumstances, clinical risk and patient wishes.

Conclusion

The interdisciplinary model is a useful and highly applicable approach to cough and secretion management for individuals living with MND. Particularly beneficial for:

- Prescription of cough and secretion management programmes that account for patient preferences and daily routines.
- Patient education and awareness to optimise patient self-efficacy and empowerment.
- Alterations or cessation of current pharmacological secretion management prescriptions.
- Alterations or cessation in expensive and/or invasive chest management programmes.

Recommendations

We would advocate combined SLT and PT expertise to assess and manage all patients with MND experiencing issues with secretions and cough clearance.