

Management of Parkinson's Disease Patients with Dysphagia

****TAKE ACTION** DO NOT OMIT PD MEDS**

Patients must receive medication on time

Refer for SALT review ASAP if any concerns regarding swallow

FIRST CONSIDER

- Can the regular medication be **crushed**?
- Contact your ward pharmacist for information on crushing and dispersing the patients usual medication

NBM

- Consider **NG tube**
- Check conversion of current PD and other regular meds
- Contact your pharmacist for information on crushing and dispersing / liquid options

NG tube unsuitable

- NGT not tolerated or impaired GI absorption then convert to a **Rotigotine patch**
- Use **OPTIMAL calculator** for guidance
- Due to risk of side effects especially in elderly patients the **maximum** recommended starting dose is **6mg**

Why is this important?

If patients cannot take their medication in a timely manner, the symptoms of their PD will rapidly deteriorate. This can result in patients developing distressing symptoms, making them more dependent and at higher risk of aspiration. This can ultimately lead to life-threatening complications, delayed recovery and discharge and poor outcomes

For further help and support:

- **In hours** (Mon-Fri 9am –5pm): contact your ward pharmacist
- **Out of hours**: contact the on call pharmacist via switchboard
- Specialist referral: send a referral to COTE secretary