





AIMS




- 1) EVALUATE TONGUE STRENGTH AND ENDURANCE A MINIMUM OF 12 MONTHS POST OESOPHAGECTOMY.
- 2) IDENTIFY ASSOCIATIONS BETWEEN TIME SINCE SURGERY, TONGUE PRESSURE, TONGUE FUNCTION, SARCOPENIA, AND ASPIRATION.

METHOD

 **OBSERVATIONAL CROSS-SECTIONAL STUDY (N=40)**

-  VFSS - MBS IMP PROFILE
-  IOPI
-  SARC-F (RISK OF SARCOPENIA QUESTIONNAIRE)

RESULTS

	 kPa	 kPa	 (s)
Mean strength/endurance	42.99+/-10.9	39.8 +/-11.19	23.4+/-29.9
Below Norms (4,5)	46% (n=18)	35.89% (n=14)	53.8% (n=21)

RISK OF SARCOPENIA: N = 1

THERE WERE ONLY SIGNIFICANT ASSOCIATIONS BETWEEN MONTHS SINCE SURGERY AND:
I) TONGUE CONTROL DURING BOLUS HOLD (RS= -.314, P = .048) AND II) BOLUS TRANSPORT (RS= -.385, P = .014).

INTRODUCTION

SURVIVORS OF OESOPHAGEAL CANCER SURGERY PRESENT WITH REDUCED TONGUE STRENGTH ACUTELY, WHICH IS ASSOCIATED WITH DYSPHAGIA, ASPIRATION AND SARCOPENIA (1, 2,3). HOWEVER, LITTLE IS KNOWN ABOUT TONGUE STRENGTH IN THE LONG-TERM.

LONG-TERM LINGUAL DYSFUNCTION FOLLOWING OESOPHAGEAL CANCER SURGERY: A CROSS-SECTIONAL PROSPECTIVE STUDY

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DISCUSSION

SURVIVORS OF OESOPHAGEAL CANCER HAVE CHRONICALLY REDUCED TONGUE STRENGTH AND ENDURANCE A MEAN OF 51 MONTHS POST-SURGERY. TONGUE FUNCTION IMPROVES WITH TIME. FURTHER RESEARCH EXPLORING THE EFFICACY OF LINGUAL REHABILITATION IS WARRANTED.