



# 新聞稿 PRESS RELEASE

To News Editor  
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## **CUHK Advocates Palliative Care for Advanced Dementia Patients with Swallowing Problems**

With the ageing population, an increasing number of people are suffering from dementia which accounts for up to one-third of deaths in developed countries. Swallowing problems are common among advanced dementia patients. Most doctors suggest using feeding tube to deliver nutrients to patients. A collaborative research conducted by The Division of Geriatrics, Department of Medicine and Therapeutics at The Chinese University of Hong Kong (CUHK) and the Shatin Hospital found that the use of feeding tube would raise the risk of chest infection among advanced dementia patients and failed to extend their lifespan, while restraining their physical activities. CUHK therefore suggests that the palliative care approach should be adopted to alleviate the suffering of advanced dementia patients with swallowing problems.

Tube feeding provides nutrients to patients via a tube through the nose to the stomach.. As dementia patients are not able to understand the purpose of it nor to make decision on using it or not, they will usually remove the tube which causes discomfort to them. The patients will usually be restrained physically to prevent them from removing it.

In 2008, a research team led by Professor Timothy Chi Yui KWOK, Professor, Division of Geriatrics, Department of Medicine and Therapeutics at CUHK, jointly conducted a survey with the Department of Medicine and Geriatrics at Shatin Hospital on 81 advanced dementia patients (mean age 88.4 years, 61% female). They were all incontinent and had swallowing problems, 82% could not speak; 57% were on urinary catheters; 79% were tube-fed; 20% had their arms restrained to prevent them from removing tubes and lines; 75% had at least one bedsore (localized skin injuries developed in patients who need to stay in bed for a long time) and 7% had gangrenous feet. Amongst the 81 patients, half of them died of pneumonia while 18% died of infection from bedsores or gangrene.

CUHK suggests adopting the palliative care approach, such as hand feeding, for advanced dementia patients with swallowing problems. Apart from offering careful hand feeding, the care team of Shatin Hospital will also explain the pros and cons of tube feeding to the patient's family. Once a consensus is reached between the hospital and the patient's family, the decision will be documented in the 'Advance Care Plan' so that related doctors will be aware of the decision. These patients will also be included in the 'End of Life' programme so that discharged patients can be readmitted directly to Shatin Hospital if needed.



致新聞編輯  
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### 中大建議以舒緩性手法護理末期腦退化症患者的吞嚥困難

隨著老年人口不斷上升，腦退化症患者亦隨之增加。在發達地區或國家，因腦退化症而死亡的人數高達三分之一。吞嚥困難在末期腦退化症患者中相當普遍，醫生會建議使用餵食喉協助病人攝取足夠營養。香港中文大學(中大)及沙田醫院一項合作研究發現，餵食喉會增加患者感染肺炎的風險，亦無助延長病人壽命。此外，過程中患者還要承受被限制活動的痛苦。因此，中大建議以人手餵食代替管飼，以保持末期腦退化症患者的生活質素。

管飼即以從鼻孔插入餵食喉到胃部，為病人提供食水及流質食物。然而，腦退化症患者不明白管飼的需要，亦沒有決定是否使用管飼的能力。為避免他們因喉管帶來不適而自行拔管，醫護人員往往會將患者雙手縛起，限制其活動能力。

中大內科及藥物治療學系老人科郭志銳教授的研究團隊與沙田醫院老人及內科部於2008年合作進行了一項調查，涉及81名患有末期腦退化症的病人，61%為女性，平均年齡88.4歲。這些病人全部都有失禁和吞嚥困難，其中有82%不能說話，57%使用導尿管，79%需要以餵食喉餵食，20%被約束手臂以防拉走喉管，75%帶有最少一個褥瘡（患者因長期卧床，皮膚受壓出現潰瘍），7%下肢壞死。這些病人有一半死於肺炎，18%死於褥瘡或下肢壞死。

中大建議應該以舒緩性手法，例如人手餵食，護理末期腦退化患者的吞嚥困難。沙田醫院的醫護人員為此推行了「預立醫療照顧計劃」，由醫生為患者家屬分析管飼的利弊，當雙方有共識以人手餵食時，便會將決定記錄在案，讓日後所有相關醫生有所依循。同時，醫院亦會將此類病人納入「晚期護理計劃」，好讓他們出院後若有需要可直接送往沙田醫院接受治療。