

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

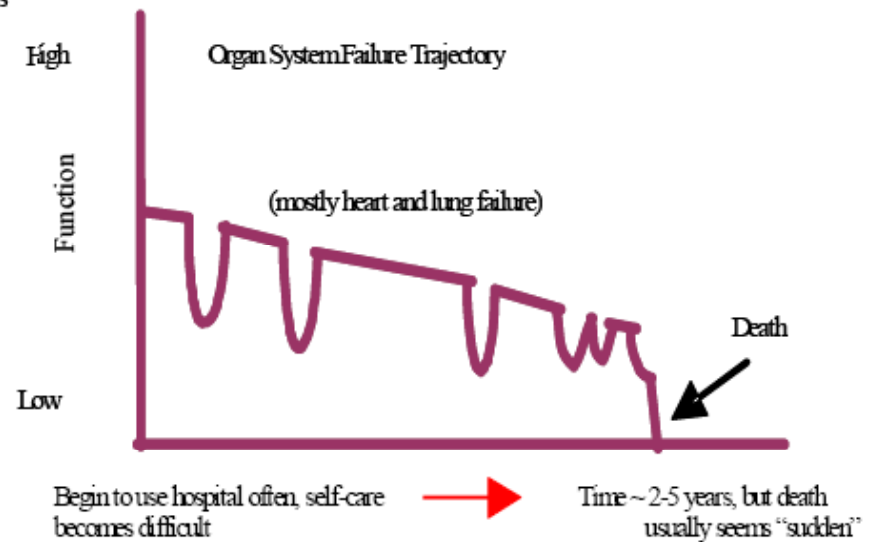
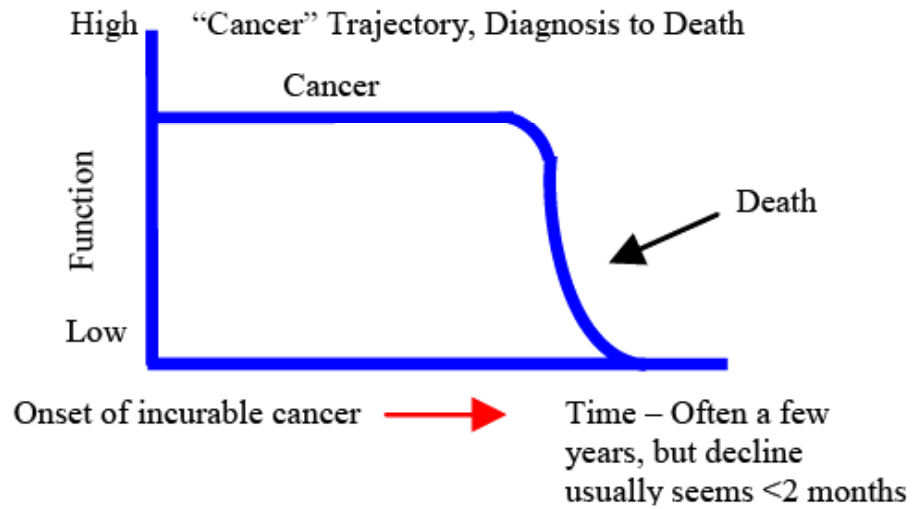
中大建議以舒緩性手法  
護理末期腦退化症患者的吞嚥困難

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# Advanced Dementia

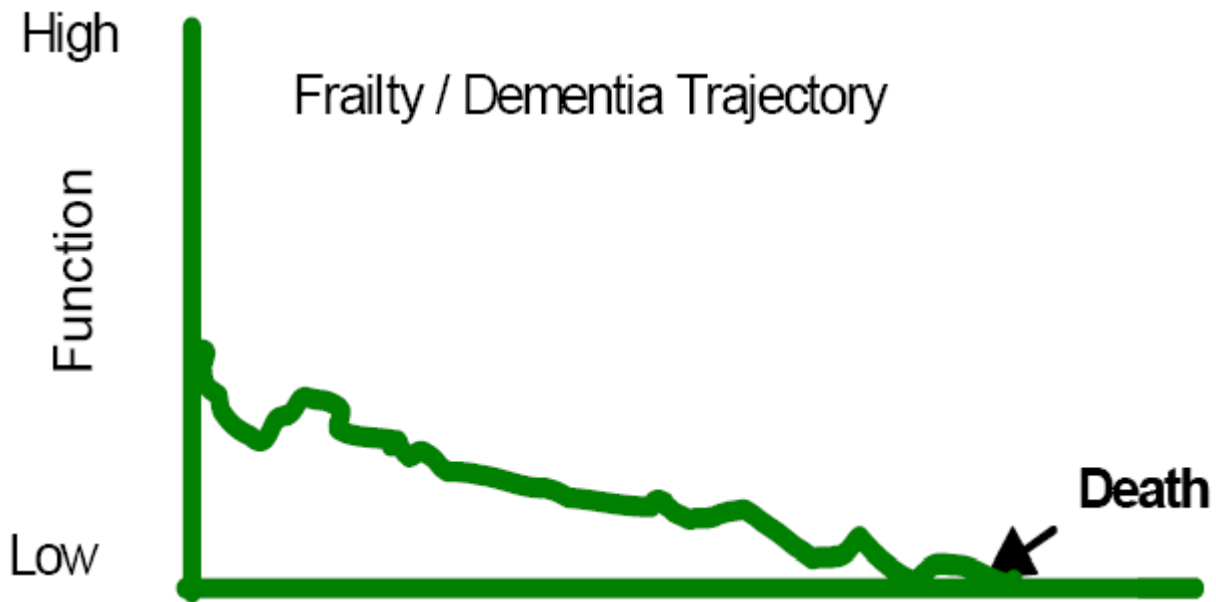
- “The Living death”
- The “Silent & Invisible”

# Trajectories



# A different kind of death

- Trajectory



Onset could be deficits in  
ADL, speech, ambulation



Time ~ quite variable -  
up to 6-8 years

# Clinical Prognostic Indicators (for death with 6-12 months)

## Dementia

- Cannot walk or dress without assistance
- Double incontinent
- No meaningful verbal communications
- Loss in most or all abilities in self-care
  
- Plus any of:
  - 10% wt loss in past 6 month
  - Alb < 25 g/L
  - ↓*oral intake*
  - *Urinary tract infections*
  - *Chest infections*
  - *Recurrent fevers*
  - *Deep pressure ulcers*

# 腦退化症病患的死因

- 肺炎 (50%)
- 壓瘡或壞疽肢體感染 (18%)
- 尿道炎 (8%)
- 腎衰歇 (8%)
- 註：“腦退化症”極少被列作死因

沙田醫院內部審計數據，2007年11月至 2008年1月

# 最後一次住院期間狀況

- 不能言語 - 82%
- 管飼 - 79%
- 壓瘡 - 75%
- 使用導尿管 - 57%
- 手部被約束 - 20%
- 壞疽 - 7%

# 吞嚥困難

吞嚥功能衰退在晚期腦退化症中十分普遍

– 34% 晚期腦退化症護老院住宿者正接受管飼. (Sampson et al. Cochrane review 2009)

管飼常被視作解決肺炎、拒食、或哽塞的方案



# 管飼能否延命？

- 根據一項美國的晚期腦退化症患者的研究
- 管飼開始後：
  - **64%** 於一年內死亡
  - 半數於半年內死亡
  - 生存中位數**54**天

Kuo et al. JAMDA 2009  
Meier et al. Arch Int Med 2001

# 管飼能否預防肺炎？

- 無據證支持
- 手飼生存時間亦相若
- 管飼增加肺炎風險：
  - 細菌定植
  - 下食道括約肌閉鎖不全
  - 防礙保護氣道反射運作

# 提倡管飼的誘因

- 較高福利醫療撥款 (美國)
- 較少人手支出
- 誤解: 「無管飼」等同「放棄餵食」、對管飼效用存有誤解

# 「舒緩餵食」

## Comfort Feeding

- 不接受管飼的另一選擇
- 提升病人晚期生活素質

# 拒食原因

- 身體：由口腔不適、不潔，以至便秘、或其他不適
- 心理：對環境、餵食者、食物抗拒

# 方法

- 環境：安靜、安全
- 人物：熟悉
- 食物：色香味、開胃菜

# To tube feed or not

- There is no absolute right or wrong choice!
- Depends of individual belief (the patients, and the family's)
- Based on evidence...
- Based on clinical conditions...

# Ask / discuss with the family: Role of *Advance Care Planning (ACP)*

- Respect patient's or family's wish:
  - If family requests "no tube feed": probably speaking for the patient's best interest / advance communication with patient. Respect unless very irrational (e.g. clinically not End Stage, tube feed for GIB only)
- When in doubt, timed trial?
  - If requires restraints to keep tube, probably not a good choice.



Thank you