Fact Sheet 4: Dementia and stroke or coronary heart disease

Tips for eating and swallowing

After a stroke or in the later stages of dementia, there is a risk of poor nutrition due to:

- loss of appetite
- forgetting to eat
- problems with mouth, chewing and swallowing
- problems using cutlery.

Loss of appetite

A person with dementia may have a loss of appetite. They might forget how to chew and swallow, have ill-fitting dentures, a sore throat, tooth or gum problems, or constipation, not enough physical activity or be embarrassed by problems with eating.

What to try:

- Check there are no treatable causes for loss of appetite, such as illness or depression.
- Offer regular small snacks during the day, rather than three big meals.
- Let the person eat when hungry.
- Encourage physical exercise.
- Have balanced meals to avoid constipation.
- Offer ice cream or milk shakes, if appropriate.
- Try to make familiar foods in familiar ways, especially favourite foods.
- Encourage eating all or most of one food before moving on to the next. Some people become confused when the tastes and textures change.
- Try to make mealtimes simple, relaxed and calm. Be sure to have enough time for a meal.

Helping a very impaired person to eat can take up to an hour. Speak with a doctor if there is a lot of weight loss. Check with the doctor about vitamin supplements.

Forgetting to eat

What to try:

- An alarm clock or even better, a phone call may be a useful reminder at mealtimes.
- Leave snacks out that are easy to eat and don't need to be refrigerated. Try leaving them where they can be easily seen.
- Have meals with other people around a table.

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Mouth, chewing and swallowing problems

Some causes of problems with eating may be related to weakened muscles of the mouth or throat. This can cause coughing or choking when eating or drinking. A dry or sore mouth from gum disease or ill-fitting dentures is also common.

What to try:

- Have a dental check-up of gums, teeth and dentures.
- Think about making a time with a speech pathologist for expert advice.
- For chewing problems, try light pressure on the person's lips or under their chin, tell the person when to chew, do a chewing action yourself, wet foods or offer small bites one at a time.
- For swallowing problems, remind the person to swallow with each bite, stroke their throat gently, check their mouth to see if food has been swallowed.
- Offer smaller bites.

Speak with the doctor if choking problems start to happen.

Problems using cutlery

People should be able to eat with dignity. If a person with dementia is having trouble with cutlery, try offering. This way, people can still feed themselves.

What to try:

- Make a plate of nutritious and attractive food that can be picked up with the fingers.
- Put the food on a flat plate with no pattern so that the food is easy to see. Make sure the plate is easy to reach.
- Serve only one plate of food at a time.
- Have simple table settings without lots of different cutlery, crockery, glasses, food and drinks together.
- Have tasty, strongly flavoured and aromatic food so people feel like eating.
- Leave time for the memory to return.
- At first, maybe help a person's fingers to take the food from plate to mouth.
- It can help to eat together so that the person with dementia can copy you.
- Have food that is familiar, and that the person likes.
- Have foods that fit in with the person's culture and past eating habits.