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ABSTRACTS**Epilepsy: An overview**

Nancy Thornton, RN, MSN, CNN(C), and Maureen Robertson, RN, CNN(C)

According to Epilepsy Canada (2001), one to two per cent of Canadians have epilepsy and 75 to 80 per cent of these people develop it before the age of 18. Despite the fact that many famous and successful people throughout history have had epilepsy, misunderstanding and prejudice about this common neurological disorder remain prevalent. In our experience, some people diagnosed with epilepsy do not tell others about their medical condition because of their fear of being stigmatized and shunned.

Meeting the nutritional needs of patients with severe dysphagia following a stroke: An interdisciplinary approach

By Nathalie Rodrigue, Robert Côté, Connie Kirsch, Chantal Germain, Céline Couturier, and Roxanne Fraser

Dysphagia is a common problem with individuals who have experienced a stroke. The interdisciplinary stroke team noted delays in clinical decision-making, or in implementing plans for patients with severe dysphagia requiring an alternative method to oral feeding, such as enteral feeding via Dobhoff (naso-jejenum) or PEG (percutaneous endoscopic gastrostomy) tubes, occurred because protocols had not been established. This resulted in undernourishment, which in turn contributed to clinical problems, such as infections and confusion, which delayed rehabilitation and contributed to excess disability.

The goal of the project was to improve quality of care and quality of life for stroke patients experiencing swallowing problems by creating a dysphagia management decision-making process. The project began with a retrospective chart review of 91 cases over a period of six months to describe the population characteristics, dysphagia frequency, stroke and dysphagia severity, and delays encountered with decision-making regarding dysphagia management. A literature search was conducted, and experts in the field were consulted to provide current knowledge prior to beginning the project.

Using descriptive statistics, dysphagia was present in 44% of the stroke population and 69% had mild to moderate stroke severity deficit. Delays were found in the decision to insert a PEG (mean 10 days) and the time between decision and PEG insertion (mean 12 days).

Critical periods were examined in order to speed up the process of decision-making and intervention. This resulted in the creation of a decision-making algorithm based on stroke and dysphagia severity that will be tested during winter 2002.