



Modernising Patient Pathway Programme

Dysphagia Pathway



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Background



Dysphagia is defined as difficulty swallowing. It is a condition that can occur at any age but is more common in older adults. Dysphagia can be painful and, in some cases, swallowing may be impossible.

Pathway recommendations



Guidance for Primary Care

Dysphagia is defined by the cancer referral guidelines as 'persistent or progressive dysphagia, not 'feeling of something stuck in the throat' (FOSSIT).

There are both neurology and Ear, Nose and Throat (ENT) causes for dysphagia. Patients should be referred to the appropriate specialty, e.g.

- choking or hoarse voice symptoms should be referred to ENT
- neurologic disease or symptoms should be referred to Neurology

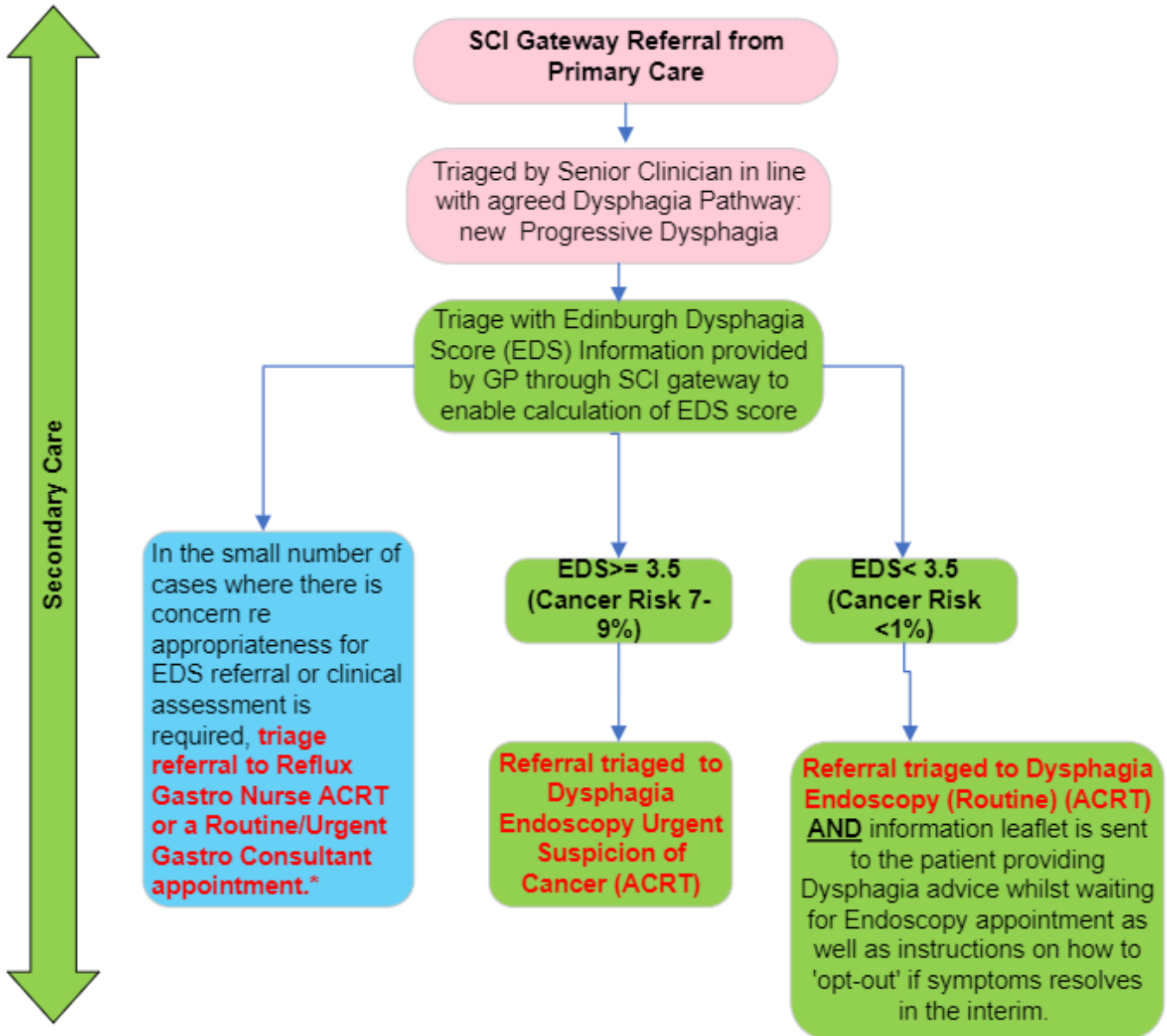
Traditionally, true dysphagia has been a red flag symptom requiring urgent investigation. Patients who are likely to have cancer and need investigation can be identified by using the Edinburgh Dysphagia Score (EDS) (see Appendix 1). Those with a low EDS should be referred for investigation to exclude other non malignant causes such as Eosinophilic Oesophagitis.

It is vital to include relevant information in the referral to secondary care to allow the EDS to be calculated. This should include:

- weight loss above 3 kilograms (kg)
- current reflux
- duration of symptoms, and
- whether symptoms localise to the neck.

Patients with a low EDS will be offered a routine investigation and advice about treatment for reflux while waiting for tests. Reflux disease is the most common cause of reflux in this group.

NHS Scotland Dysphagia Pathway



*N.B Reflux clinic to be held by nurse/AHP/Consultant depending on Health Board staffing provision.

Appendix 1 - Edinburgh Dysphagia Score

A Age	Points
18-39	0
40-49	4
50-59	5
60-69	6
70-79	7
80-89	8
90-9	9

D Dysphagia localises to neck	
Yes	-2
No	0

F Duration of symptoms >6m	
Yes	-1.5
No	0

B Gender	
Male	0
Female	-1

C Current acid reflux	
Yes	-1
No	0

E Weight loss >3kg	
Yes	2
No	0

A+B+C+D+E+F = Edinburgh Dysphagia Score

If ≥ 3.5 then patient requires further investigation as higher risk of cancer

If < 3.5 then lower risk

References and further resources



Patient resources

Patient Information Leaflet (provided by your NHS Health Board)

[NHS Inform Illnesses and conditions: Dysphagia \(swallowing problems\)](#)

References

[NICE Guidelines: Gastro-oesophageal reflux disease and dyspepsia in adults: investigation and management](#)

[BMJ Journals, Gut: Diagnostic yield from symptomatic gastroscopy in the UK: British Society of Gastroenterology analysis using data from the National Endoscopy Database](#)



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