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<https://www.nestlenutrition-institute.org/resources/nutrition-tools/details/swallowing-assessment-tool>

# EAT-10:

## A Validated Dysphagia Screening Tool



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Patient information for distribution by healthcare professionals only.

# Dysphagia

People with Dysphagia have difficulty swallowing liquids, foods, or saliva. Eating and drinking then becomes a challenge.

Prevalence of dysphagia in various healthcare settings <sup>1,2</sup>

Population	Estimated Prevalence of Dysphagia
Community dwelling elderly	14 %
Acute care patients	Up to 25 %
Long-term care patients	30-40 %

## Causes :

- The swallowing mechanism changes with age, due to acute illness or the use of certain medications.
- Some diseases of the nervous system, such as Alzheimer's or Parkinson's disease, stroke, or head injury, and even the normal process of aging change neural and muscular function and affect swallowing.
- In addition, cancers of the head, neck and esophagus may cause swallowing problems.

## Consequences:

### Health

- Malnutrition and dehydration.
- Aspiration pneumonia: causing mortality in half of the cases.<sup>4</sup>

### Quality of life (QoL)

- Fear, shame and embarrassment about their swallowing difficulty.

Prevalence of complications among dysphagic elderly <sup>4,5,6</sup>

Complications	%
Inadequate fluid Intake	Up to 39 %
Malnutrition	Up to 100 %
Pneumonia	Up to 50 %

Individuals with Dysphagia suffer Increased Risk of Death and Decreased Quality of Life



**75%**  
of patients  
are not diagnosed<sup>3</sup>

# EAT-10 : A Validated Dysphagia Screening Tool



## What is EAT-10?

The EAT-10 is a self-administered, symptom-specific survey instrument for dysphagia.

- Specifically developed to assess dysphagia symptom severity.
- Completed within 2 minutes.
- Used to identify those who should receive further evaluation.
- Designed by a multidisciplinary group of experts.
- Made up of 10 items selected by strong test-retest correlations

## Specific groups to screen regularly with EAT-10

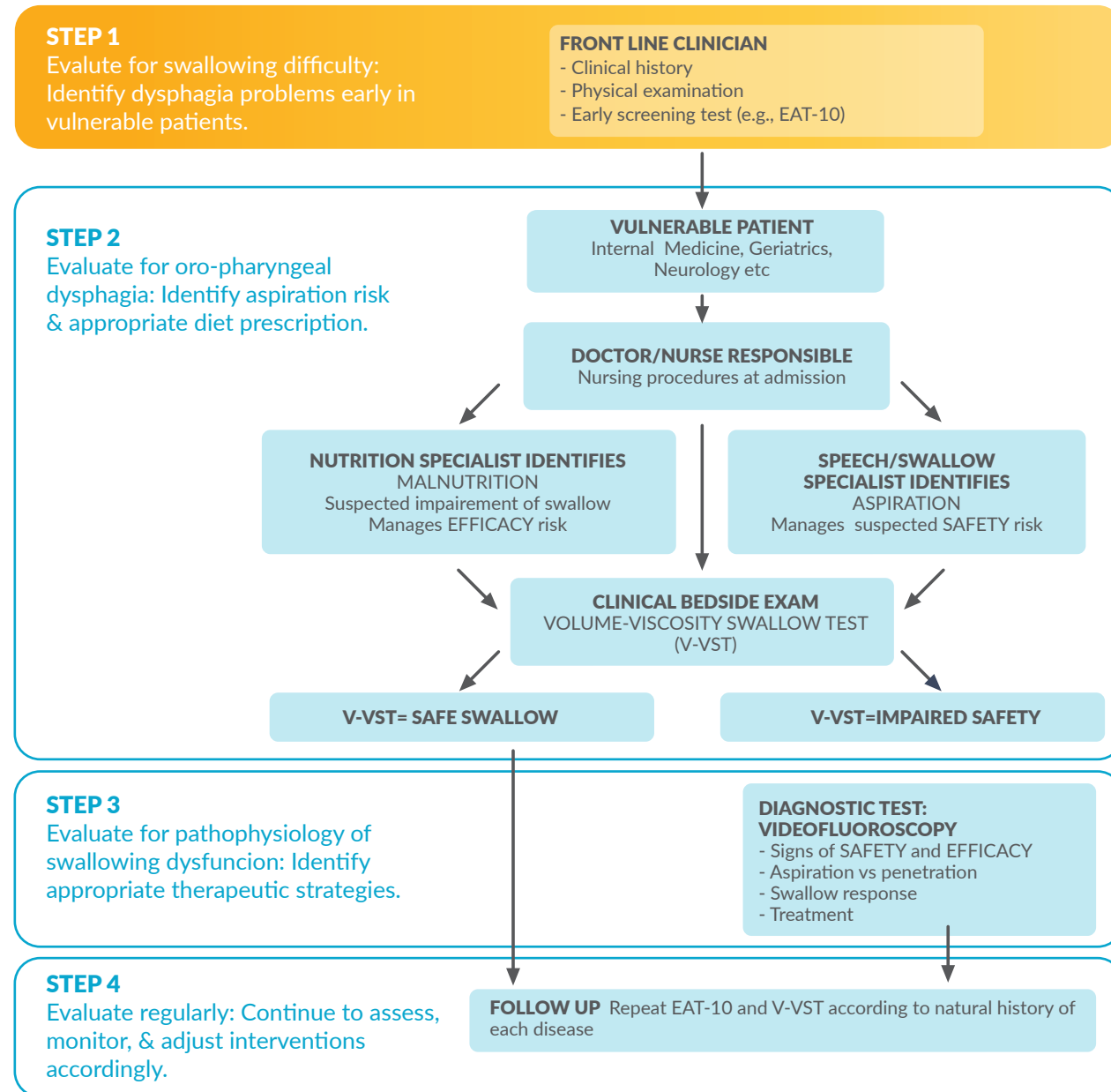
- Adults with neurological conditions (Alzheimer's or Parkinson's disease).
- Elderly, who are frail, dependent on social services, reside in assisted living and have had a case of pneumonia.
- Other patient group (post-stroke etc.) may deserve further evaluation by a trained dysphagia specialist.

The EAT-10 is a validated, reliable and practical screening tool for routine use in the care of older people, improving their health, QoL and reducing healthcare costs.



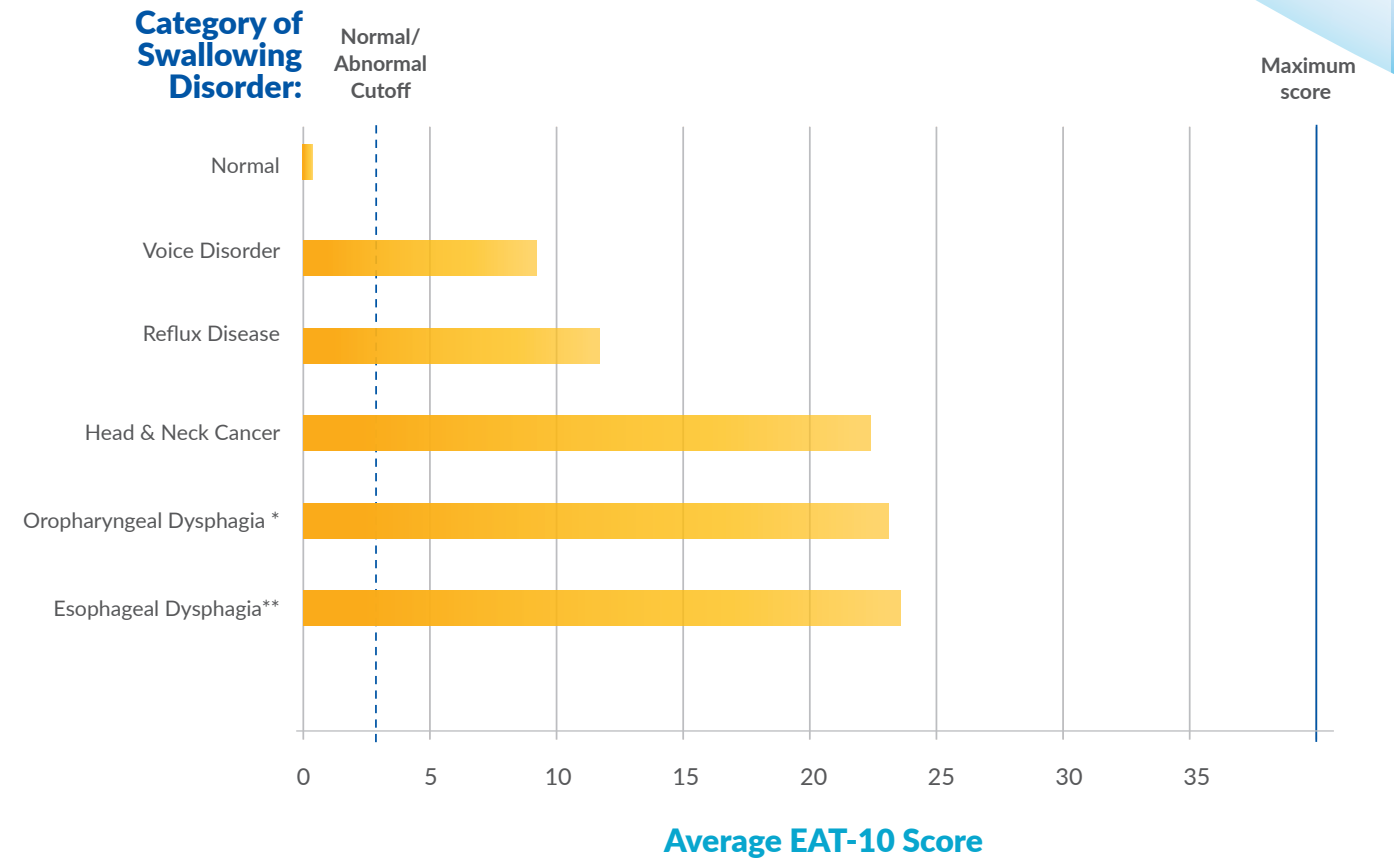
# EAT-10 is for early stage risk detection

## Simplified dysphagia patient management protocol\*



\* Adapted from Clavé P, Arreola V, Romea M, Mediana L, Palomera, Serra-Prat M. Accuracy of the volume-viscosity swallow test for clinical screening of oropharyngeal dysphagia and aspiration. Clin Nutr. 2008;27(6):806-815

# Typical EAT-10 Scores by Type of Swallow Impairment<sup>7</sup>



\* Mostly patients with a diagnosis of stroke or progressive neurologic disease (Parkinson's disease, etc).  
\*\* Mostly patients with a diagnosis of esophageal motility disorders, neoplasia, webs, strictures, or rings.

### REFERENCES

1. Kawashima et al. Prevalence of dysphagia among community-dwelling elderly individuals as estimated using a questionnaire for dysphagia screening. *Dysphagia*. 2004;19(4):266-71.
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6. Hudson et al. The interdependency of protein-energy malnutrition, aging, and dysphagia. *Dysphagia*. 2000;15(1):31-8.
7. Belafsky et al. Validez y confiabilidad de la herramienta de evaluación de alimentación (EAT-10). *Ann Otol Rhinol Laryngol*. 2008; 117 (12): 919-24.



LAST NAME	FIRST NAME	SEX	AGE	DATE
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### OBJECTIVE:

EAT-10 helps to measure swallowing difficulties for you.  
It may be important for you to talk with your doctor about treatment options for your symptoms.

### A. INSTRUCTIONS:

Answer each question by writing the number of points in the boxes.  
To what extent do you experience the following problems?

**1 My swallowing problem has caused me to lose weight.**

0 = no problem  
1  
2  
3  
4 = severe problem

**2 My swallowing problem interferes with my ability to go out for meals.**

0 = no problem  
1  
2  
3  
4 = severe problem

**3 Swallowing liquids takes extra effort.**

0 = no problem  
1  
2  
3  
4 = severe problem

**4 Swallowing solids takes extra effort.**

0 = no problem  
1  
2  
3  
4 = severe problem

**5 Swallowing pills takes extra effort.**

0 = no problem  
1  
2  
3  
4 = severe problem

**6 Swallowing is painful.**

0 = no problem  
1  
2  
3  
4 = severe problem

**7 The pleasure of eating is affected by my swallowing.**

0 = no problem  
1  
2  
3  
4 = severe problem

**8 When I swallow food sticks in my throat.**

0 = no problem  
1  
2  
3  
4 = severe problem

**9 I cough when I eat.**

0 = no problem  
1  
2  
3  
4 = severe problem

**10 Swallowing is stressful.**

0 = no problem  
1  
2  
3  
4 = severe problem

### B. SCORING:

Add up the number of points and write your total score in the boxes.  
**Total Score** (max. 40 points)



### C. WHAT TO DO NEXT:

If your Total Score is 3 or higher, you may have problems swallowing efficiently and safely. We recommend that you share your EAT-10 results with your doctor.

**Reference:** The validity and reliability of EAT-10 has been determined.  
Belafsky PC, Mouadeb DA, Rees CJ, Pryor JC, Postma GN, Allen J, Leonard RJ. Validity and Reliability of the Eating Assessment Tool (EAT-10). Annals of Otolaryngology & Laryngology 2008;117(12):919-924.

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