E-Poster

EP-120

Use of the DIGEST Scale as a Global Outcome Measure for Oropharyngeal Dysphagia in Stroke Patients

Topic: Diagnosis

Cindry Ramirez Fuentes, Roser Boza Martinez, Yulibeth Curbelo, Paula Hoz San Bartolome, Miriam Llobet Capardon, Marta Tejero Sanchez, Ester Marco Navarro, Anna Guillen Sola

Department of Physical Medicine and Rehabilitation, Hospital del Mar, Barcelona, Spain

BACKGROUND

The DIGEST scale (Dynamic Imaging Grade of Swallowing Toxicity) provides a global assessment of dysphagia, considering both safety and efficiency. There are few publications that utilize it in neurological patients, although its utility has been demonstrated in the evaluation of dysphagia in patients with amyotrophic lateral sclerosis, oculopharyngeal muscular dystrophy, and Parkinson's disease.

METHODS

A retrospective analysis of prospectively collected data was conducted. Descriptive analyses (mean ± standard deviation) were performed, along with correlation analysis using Spearman's coefficient, based on data obtained through videofluoroscopic swallow studies, the Penetration Aspiration Scale, the Bolus Residue Scale, and the DIGEST.

131 videofluoroscopic swallow studies (VFSS) from 48 patients were reviewed and reassessed using DIGEST. Correlations were calculated using Spearman's correlation coefficient between DIGEST safety/Penetration-Aspiration Scale (PAS) and DIGEST efficiency/Bolus Residue Scale (BRS), as well as the overall DIGEST score. Statistical analysis was performed with SPSS 28.

RESULTS

Forty eight patients were included, with a mean age of (64.52 ± 18.66; 36 (76.6%) were male and 11 (23.4%) were female. The mean NIHSS score was (6.64 ± 5.17). Among the participants, 43 (91.5%) had ischemic strokes. Statistically significant correlations were observed between PAS/DIGEST_safety ($r = 0.981$, $p < 0.001$), BRS/DIGEST_efficiency ($r = 0.945$, $p < 0.001$), PAS/DIGEST_total ($r = 0.924$, $p < 0.001$), and BRS/DIGEST_total ($r = 0.5$, $p < 0.001$).

CONCLUSION

This study suggests that the DIGEST scale is applicable for the assessment of dysphagia in stroke patients, given its strong correlation with the PAS and BRS scales.

Statement of Disclosures

None

Corresponding Author:
Cindry Ramirez Fuentes
Department of Physical Medicine and Rehabilitation, Hospital del Mar, Barcelona, Spain
Email: cramirez@hmar.cat

Doi: 10.5606/archisprm.2026.EP-120