GRUPO HPASAUDE
PRIVATE HEALTH

HOSPITAL BEATRIZ ÂNGELO

2AS JORNADAS DE DISFAGIA
A DISFAGIA NO ADULTO

Eletroestimulação na disfagia

Vera Mangas

2018

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Eletroestimulação
Como pode ser definida???

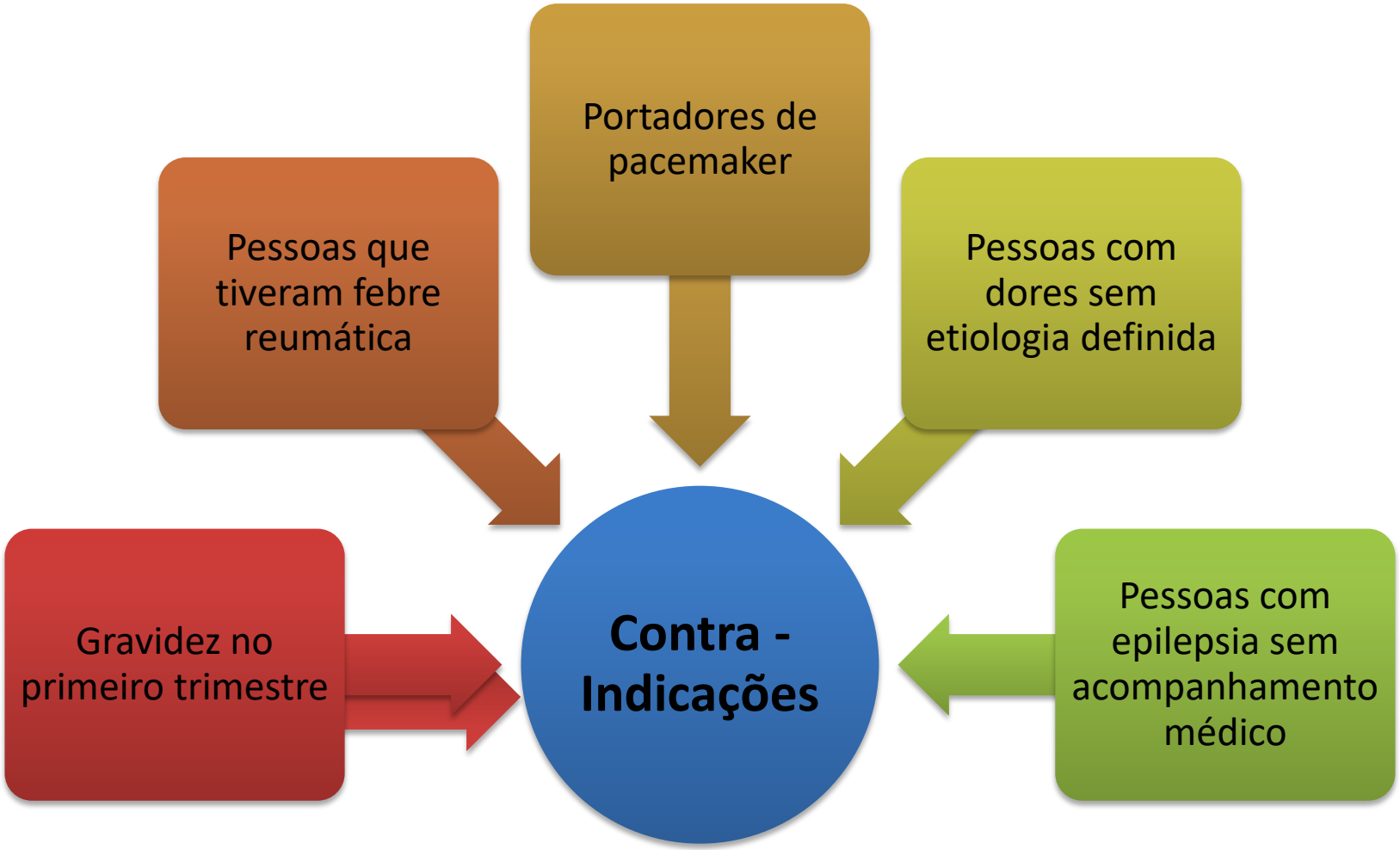
- Pode ser: **estimulação nervosa transcutânea (TENS), estimulação neuromuscular transcutânea (EENM),** intra-oral, intra-faríngea e intra-muscular
  - Técnica não invasiva aplicada através de elétrodos transcutâneos

(Guimarães, 2001; Soares, Conceição, Cardoso e Beresford, 2009; Guimarães, Furkin e Silva, 2010; Humbert, Michou,MacRae & Crujido, 2012)

Eletroestimulação
Como utilizar???

- Avaliar o músculo
- Selecionar a corrente eléctrica
- Determinar os parámetros de electroestimulação
- Selecionar e adaptar os eletrodos

Segurança

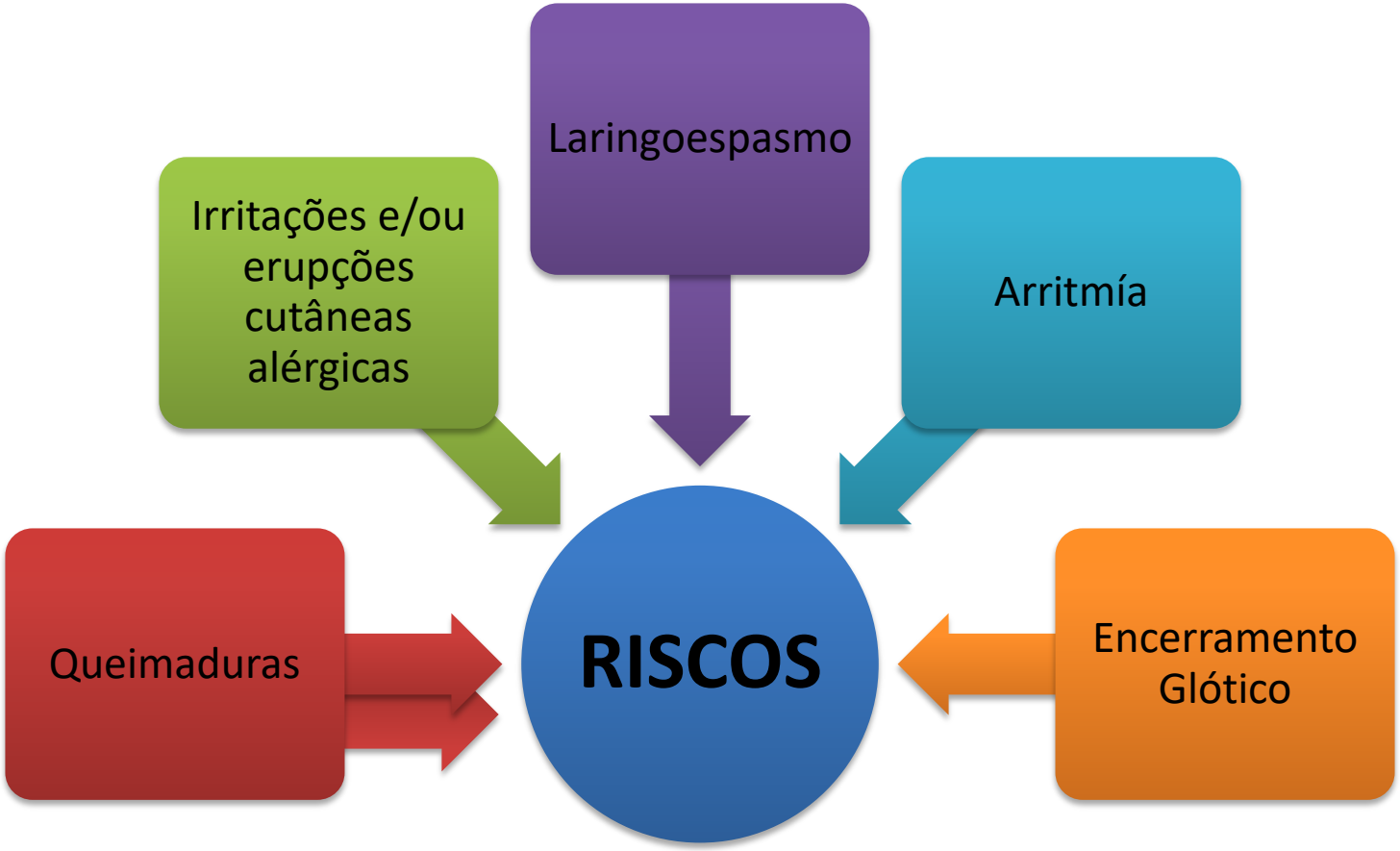

Portadores de pacemaker
Pessoas que tiveram febre reumática
Pessoas com dores sem etiologia definida
Gravidez no primeiro trimestre
Contra - Indicações
Pessoas com epilepsia sem acompanhamento médico

Segurança

NOTA: Podem ocorrer irritações e/ou erupções cutâneas alérgicas ao redor ou por baixo da colocação dos elétrodos. Havendo persistência dessa irritação o uso deve ser suspenso

(Ferreira & Beleza, 2006)

Segurança


Laringoespasmo
Irritações e/ou erupções cutâneas alérgicas
Arritmía
Queimaduras
RISCOS
Encerramento Glótico

Aparelhos

VITALSTIM THERAPY
BY CHATTANOOGA GROUP
Single Use Electrode Application Kits

MULTI-TENS
PRG 1
PRG 2
NeuroTrac®

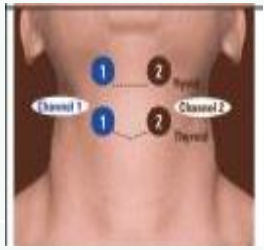
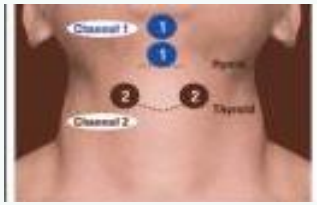
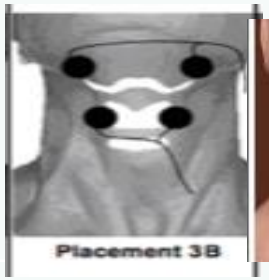
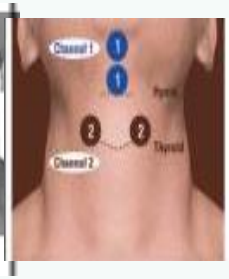
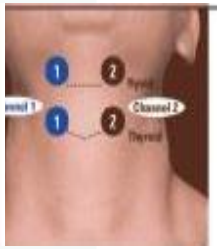
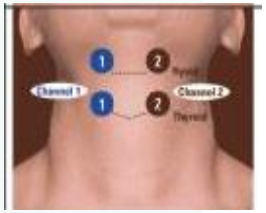
Neurodyn III

Neurodyn III

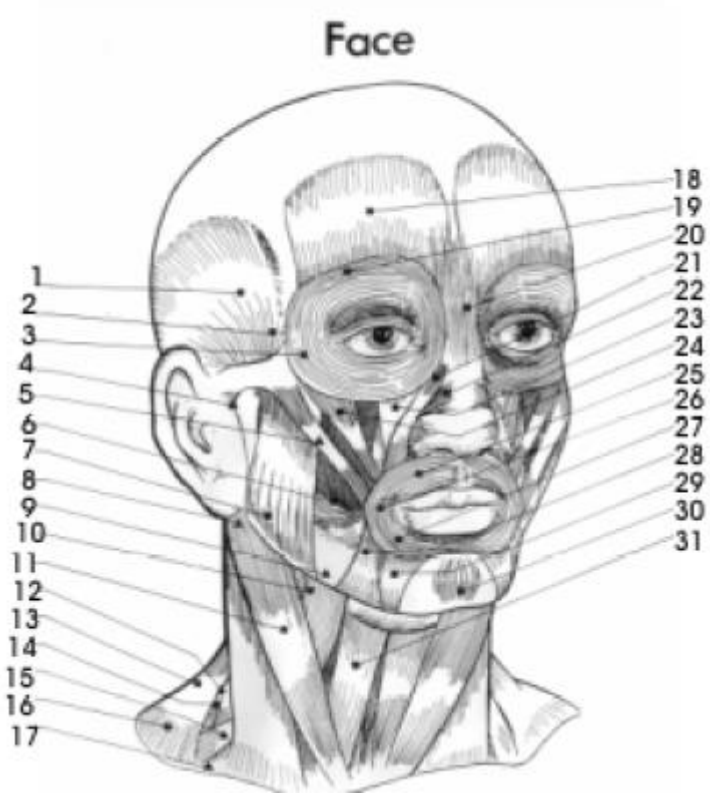
Eletrodos

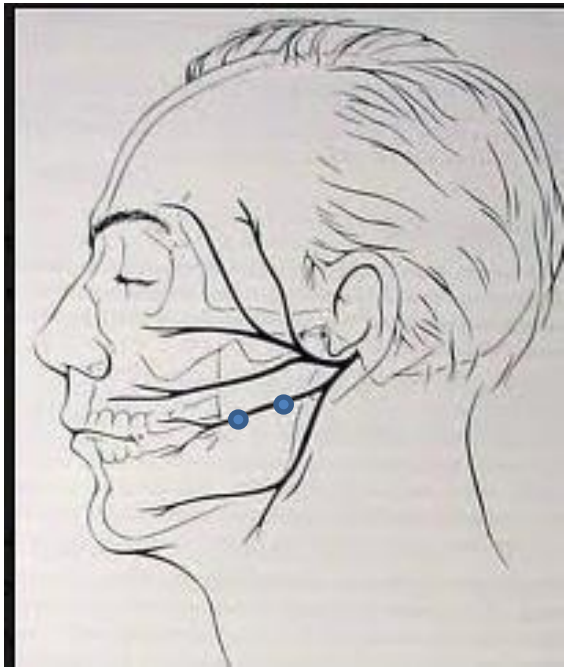
Eletrodos

- Cortados por medida segundo zona a ser estimulada ....

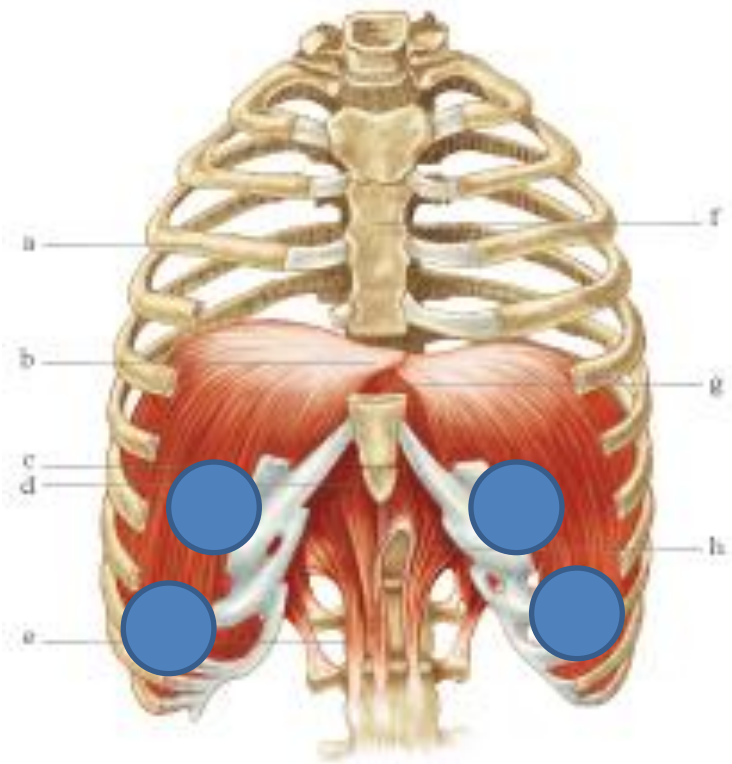
objetivos	Sinais e sintomas	Localização
Lingua	Escape prematuro; Atraso doRD Residuos nas valeculas	
constritor faringeo;	Penetração; aspiração; residuos em seios periformes; diminuição do tempo de transito faringeo	
abertura e encerramento do ees.	Seios periformes e valeculas com residuos; atraso na abertura do ees; aspiração e penetração	  
Excurção hiolaringea	Perturbação da qualidade vocal; fechamento do ESS; aspiração e/ou penetração	

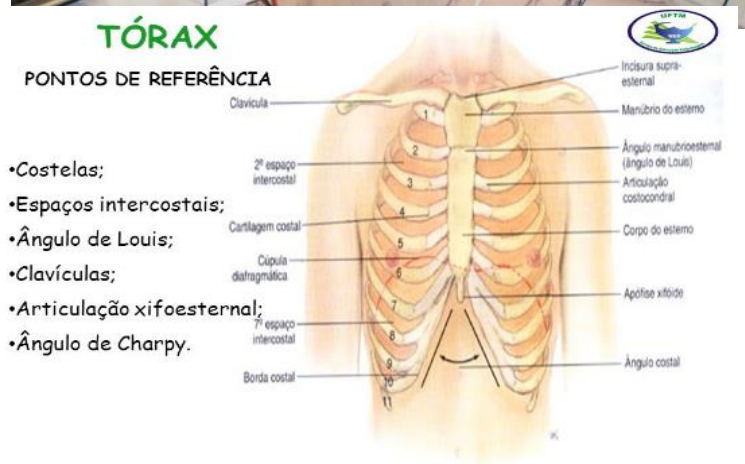
Localização



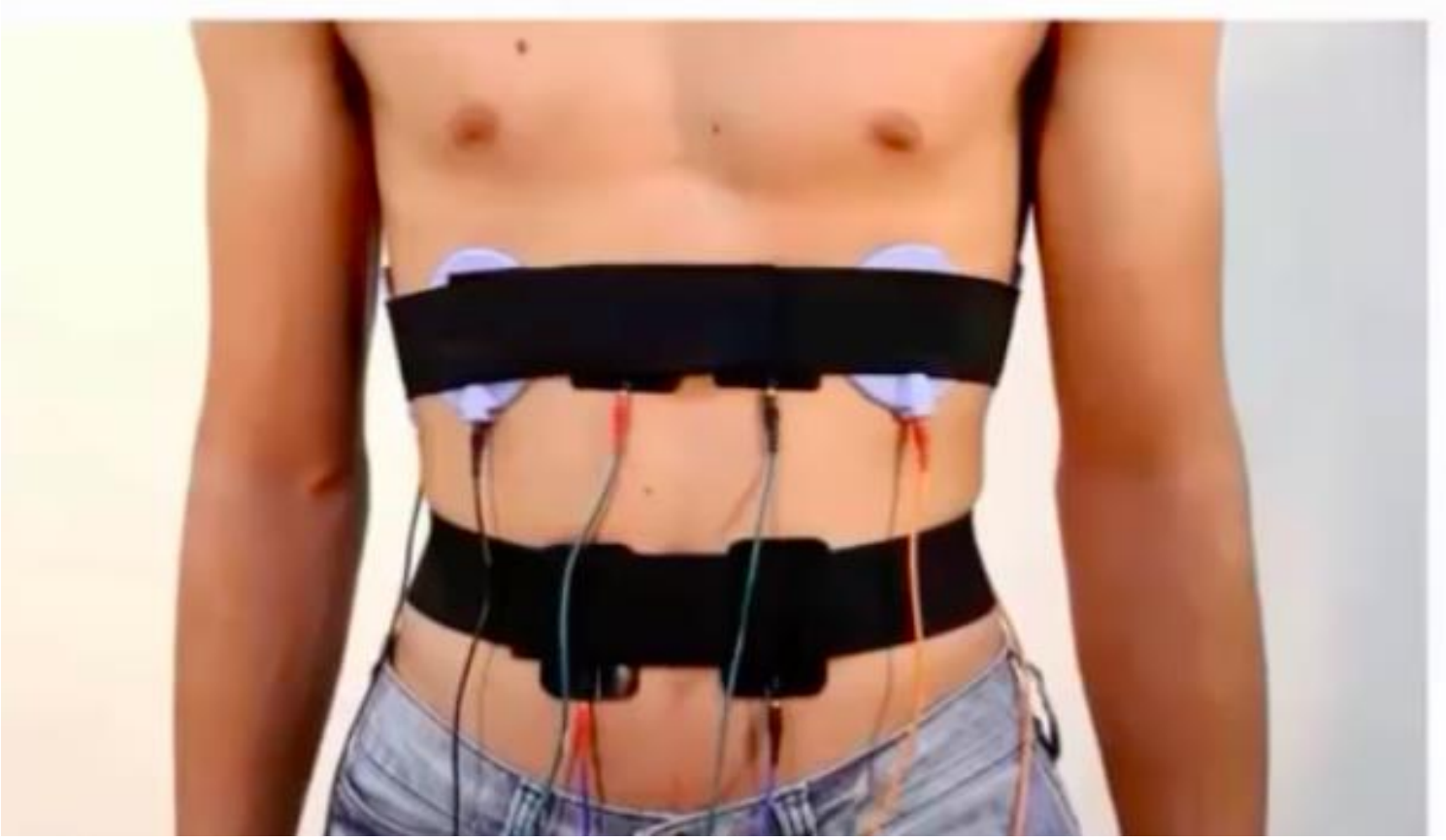


Localização



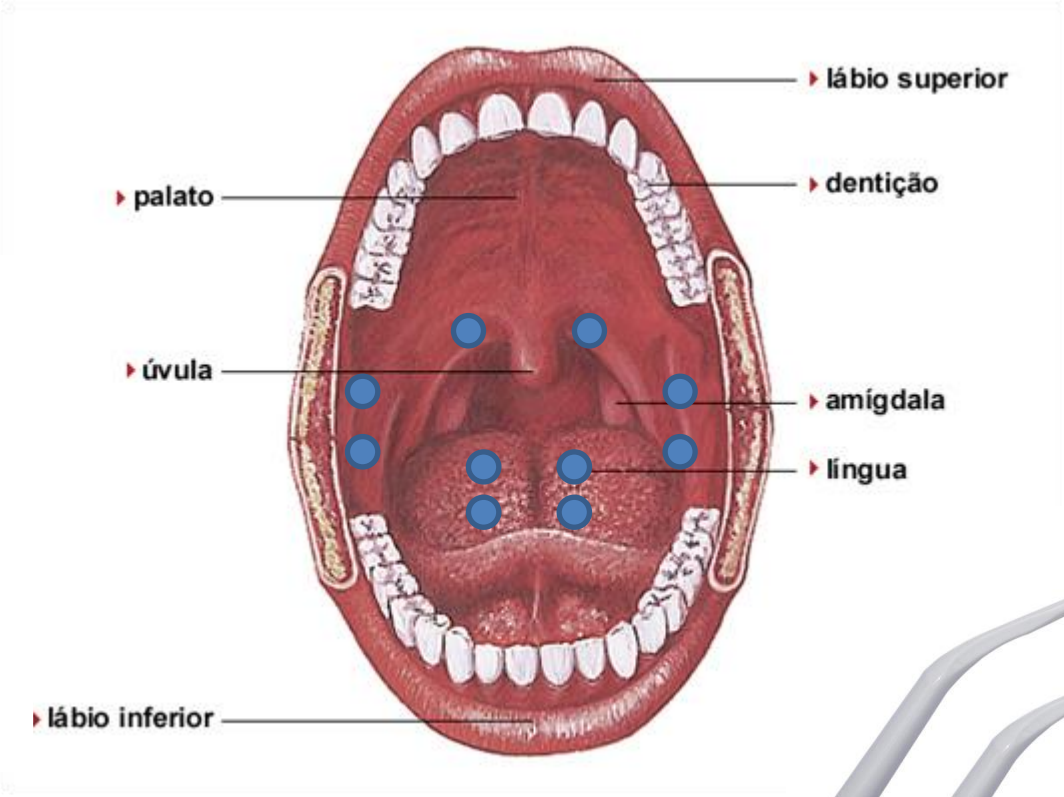


Localização



Localização

Não há estudos que comprovem!



Localização

Prática baseada na evidencia

ORIGINAL ARTICLE

Impact of transcutaneous neuromuscular electrical stimulation on dysphagia in patients with head and neck cancer treated with definitive chemoradiation

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ABSTRACT: *Background.* The purpose of this study was to investigate the role of transcutaneous neuromuscular electrical stimulation (TNMES) therapy in maintaining swallowing function during chemoradiation for locally advanced head and neck cancer.

Methods. We retrospectively compared 43 consecutive patients with locally advanced head and neck cancer treated with TNMES (treatment group) to 55 control patients. Validated swallowing scale scores were assigned.

Results. All patients' swallowing scores declined post-chemoradiotherapy. A difference in mean decline in scores for the control group versus the treatment group using the Functional Oral Intake Scale (FOIS) was seen, favoring TNMES intervention (23% vs 7%; $p = .015$). Age, race, >10 pack-years smoking, diabetes, stage, nodal disease, accelerated fractionation, weight loss, dietary modification, no TNMES, and radiotherapy dose were all significant for poorer scores on the swallowing scales.

Conclusion. TNMES should be considered an adjunct to dysphagia reduction and possible prevention in patients with locally advanced head and neck cancer. Further studies should be conducted to define the benefit of TNMES intervention. ©2015 Wiley Periodicals, Inc. *Head Neck* **37**: 1051–1056, 2015

KEY WORDS: Vital Stim, laryngectomy, dysphagia, radiation, chemotherapy

Review Article

Surface Electrical Stimulation for Treating Swallowing Disorders after Stroke: A Review of the Stimulation Intensity Levels and the Electrode Placements

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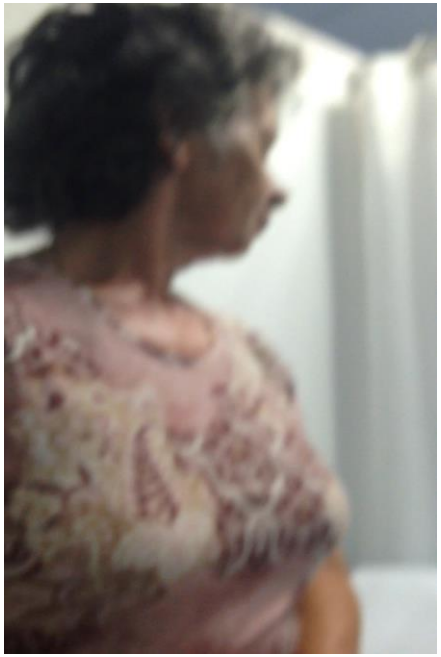
Neuromuscular electrical stimulation (NMES) for treating dysphagia is a relatively new therapeutic method. There is a paucity of evidence about the use of NMES in patients with dysphagia caused by stroke. The present review aimed to introduce and discuss studies that have evaluated the efficacy of this method amongst dysphagic patients following stroke with emphasis on the intensity of stimulation (sensory or motor level) and the method of electrode placement on the neck. The majority of the reviewed studies describe some positive effects of the NMES on the neck musculature in the swallowing performance of poststroke dysphagic patients, especially when the intensity of the stimulus is adjusted at the sensory level or when the motor electrical stimulation is applied on the infrahyoid muscles during swallowing.

Prática I

- Sr. AF
- Idade:68
- Etiología: AVC iquémico fronto-temporal do HD
- Diagnóstico Clínico AVC HD
- Diagnóstico Terapêutico: disfagia orofaríngea e disartria (com a componente vocal mais afectada)

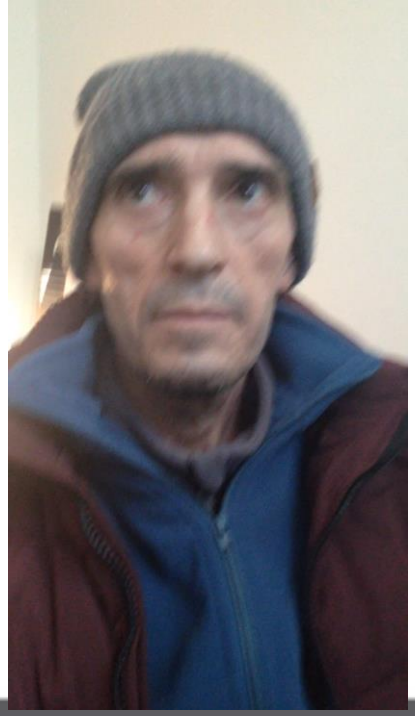
Prática II

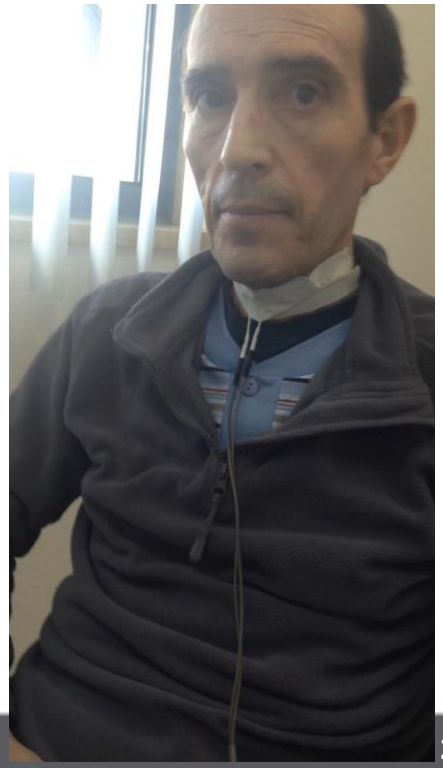
- Sr.a
- EM
- Idade:64
- Etiología: Pós cirurgia por tiroidectomia
- Diagnóstico Clínico paralisia de prega vocal à dta
- Diagnóstico Terapêutico: disfagia faríngea e disfonia organica.



Prática III

- Sr.
- VS
- Idade:63
- Etiología: Pós cirurgia por efosagectomia
- Diagnóstico Clínico paralisia de prega vocal
- Diagnóstico Terapêutico: disfagia faríngea e disfonia organica.





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