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Summary

BIOMECHANICAL AND NEUROPHYSIOLOGICAL CHARACTERIZATION OF THE PATHOPHYSIOLOGY OF OROPHARYNGEAL DYSPHAGIA IN OLDER PATIENTS

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A neurophysiological study of 12 older patients with oropharyngeal dysphagia found impairments in both sensory and motor pathways of swallowing, revealing a previously unknown motor cortex component in the pathophysiology of aging-associated dysphagia.

KEY POINTS

- 83.3% of older dysphagia patients had unsafe swallows with delayed laryngeal vestibule closure compared to young and older healthy volunteers (362.5±73.4ms vs. 185.5±57.3ms vs. 143.2±46.9ms, p<0.0001).
- Dysphagia patients showed higher pharyngeal sensory thresholds (12.2±7.5mV vs. 5.9±2.2mV in young volunteers, p=0.009) and delayed sensory evoked-potential latencies.
- Patients demonstrated reduced pharyngeal motor cortex excitability with higher motor thresholds bilaterally and delayed motor evoked-potential latencies compared to controls.
- The authors suggest these findings reveal a new element in the pathophysiology of aging-associated oropharyngeal dysphagia and may open avenues for neurorehabilitation targeting both sensory and motor pathways.

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