

#### Disclaimer

- The information presented today is intended to increase knowledge in support of individuals with intellectual and developmental disabilities
- The information is not intended to replace recommendations or instructions from an individual's health care practitioner



## Objectives

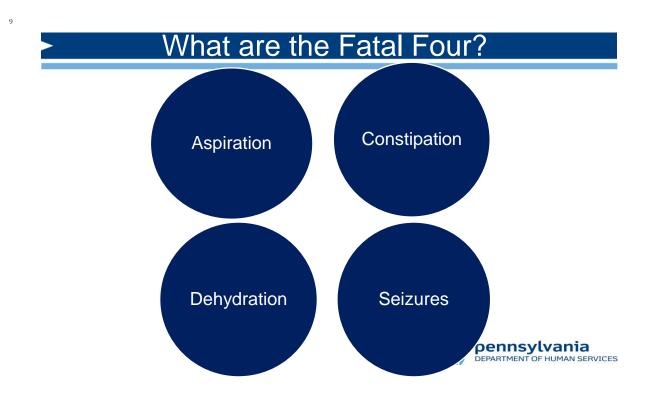
- Review four common medical conditions that are associated with preventable health complications and death
- Define each condition and review:
  - Complications
  - Symptoms
  - Causes and risk factors
  - Treatment and prevention
- Discuss planning for:
  - Risk mitigation
  - Staff education
  - Quality assurance



## What are the Fatal Four?

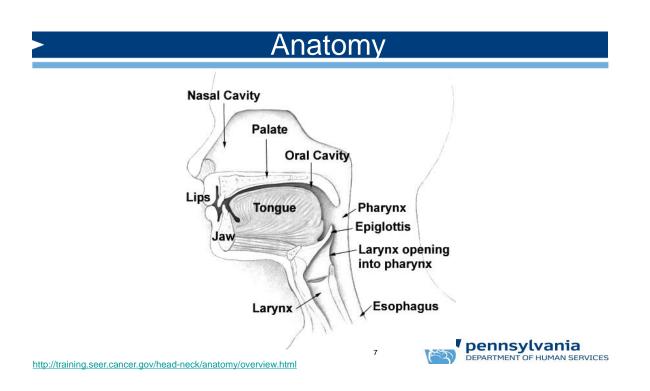
- Four major health concerns seen frequently in individuals with intellectual and developmental disabilities which if untreated can progress to serious illness or death.
- These conditions are often preventable or at least able to be managed effectively with attentive care.
- Deaths associated with these conditions are often preventable deaths





## Aspiration





#### **Definitions and Complications**

- Aspiration: When fluid, food, saliva or medication enters the lungs
- Aspiration can lead to refusal to eat, weight loss, poor nutrition, wheezing, difficulty breathing, hypoxia, and/or pneumonia which can cause death.
- **Choking:** When food or other items become lodged in the back of the throat.
- Choking can lead to a blockage in the airway, preventing oxygen from entering the lungs and the blood stream.
- This can quickly lead to irreversible brain damage and death.



## Signs and Symptoms

### Aspiration

- Coughing or excessive drooling with eating or drinking
- Difficulty breathing or shortness of breath
- Wheezing

9

- Statement such as "food is getting stuck"
- Frequent throat clearing
- Eating too fast or packing the mouth

#### Choking

- Anxious or agitated state
- Reddened face
- Difficulty or noisy breathing
- Severe coughing or gagging
- Hands to throat
- Not able to talk
- Not able to breath
- Skin turning gray or blue
- Loss of consciousness



### Aspiration/Choking

#### Causes

- Difficulty swallowing dysphagia
- Gastroesophageal reflux disease (GERD)
- Eating too rapidly
- Being fed too quickly
- Improper positioning
- Improper consistency or texture of food/liquids

#### **Risk Factors**

- Dysphagia diagnosis
- Medical disorders, including neurological
- Low muscle tone
- Polypharmacy
- GERD, esophageal strictures, feeding tubes
- Decayed or missing teeth, ill-fitting dentures
- History of pneumonia

## Aspiration/Choking

#### Treatment

9

- Identify symptoms of aspiration or choking
- Notify heath care practitioner for appropriate treatment options
- Treatment of complications of aspiration
- If individual is choking
  - THIS IS AN EMERGENCY: CALL 911 IMMEDIATELY!
  - Initiate first aid with abdominal thrusts
  - If individual becomes unresponsive, move him/her to the floor and begin CPR

#### Prevention

- Staff training for identification, documentation, modified food and drink consistency
- Notify health care practitioner, so appropriate diagnosis can be made
- Notify health care practitioner of every choking event
- Review and follow care plans
  - Supervision and assistance per orders
  - Always follow the prescribed diet
  - Prepare food as instructed
  - Avoid foods that were identified to increase risk
  - Dentures are securely in place and oral hygiene is completed per ISP.





http://www.dbhds.virginia.gov/library/quality%20risk%20management/qrm-standard%20guidance%20for%20food.pdf



# Constipation



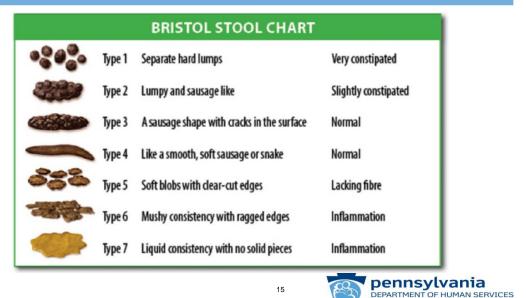
## Constipation

- Definition
  - Infrequent, hard, or hard to pass stool
  - Infrequent is often defined as fewer than three bowel movements a week
  - Normal frequency of bowel movements vary from person to person
- Complications
  - Discomfort/pain
  - Behavioral changes
  - Hemorrhoids (swollen blood vessels)
  - Anal fissures (small tears and bleeding)
  - Rectal prolapse (intestinal lining pushing through anus)
  - Fecal impaction (stool blocks the colon/rectum)
  - Bowel obstruction (complete blockage and a medical emergency)
  - Bowel perforation
  - Death





## Constipation



http://cdn.intechopen.com/pdfs-wm/46082.pdf

## **Constipation Symptoms**

- Hard and dry feces
- Hard, protruding abdomen
- · Bloating and complaints of stomach pain
- · Vomiting digested food that smells like feces
- Anorexia (loss of appetite)
- Behavioral outbursts
- Fever

9

Overflow incontinence



## Constipation

#### Causes

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- Inadequate fluid intake
- Inadequate fiber intake
- Uncoordinated muscle contractions
- Immobility
- Inactivity
- Medications
  - Iron supplements
  - Calcium supplements
- Pica (eating non-food substances)

#### **Risk Factors**

- Cerebral palsy
- Cystic fibrosis
- Muscular dystrophy
- Spinal cord injury
- Neurological damage
- Down syndrome
- Illness or injury
- Poor diet
- Polypharmacy



### **Constipation**

#### Treatment

- Juice (apple/prune)
- Suppositories
- Laxatives
- Stool softeners
- Enema
- Disimpaction (removing stool)
- Nasogastric tube

#### Prevention

- Track bowel movements
- Adequate fluid intake
- Adequate fiber intake
- Regular exercise
- Probiotic agents
- Bulking agents
- Laxatives



# Dehydration



## **Dehydration Definitions/Complications**

- Loss of the amount of water in the body and may have alteration in electrolyte levels
  - Sodium, potassium, calcium, chloride, magnesium
- · Complication can be serious and include
  - Constipation
  - Heat injury
  - Acute kidney injury/kidney failure
  - Seizure from abnormal electrolyte levels/cerebral edema
  - Loss of consciousness/coma
  - Loss of blood volume or shock which can lead to death



## **Dehydration Symptoms**

#### Mild/Moderate Dehydration

- Dry mouth
- Dry eyes
- Increased thirst
- Dark concentrated urine
- Decrease urine volume
- Muscle weakness
- Headache
- Dizziness

#### Severe Dehydration

- Extreme thirst
- Confusion
- Lethargy
- Sunken eyes
- No sweating
- Low blood pressure
- Coma



### **Dehydration**

#### Causes

- Decreased intake of fluids
- Increased loss of fluids

#### **Risk factors**

- Difficulty swallowing
- Limited mobility
- Poor communication
- Poor thirst recognition
- Certain medications or medical illnesses
- Heat or humidity exposure



## Dehydration

#### Treatment

- Fluid and electrolyte replacement
- IV fluids for severe dehydration
- Hospitalization for symptoms
  of circulatory collapse
- Potassium supplements
- Treat underlying cause

#### Prevention

- Drink plenty of fluids
- Increase fruits and vegetables
- Increase fluid intake with
  - Presence of vomiting and diarrhea
  - Strenuous exercise
  - Heat exposure
  - Other illnesses or certain medications
- Do not ignore your thirst
- · Avoid caffeine and alcohol



# Seizures



## **Seizures Definition/Complications**

- Abnormal, unregulated electrical activity in the brain resulting in involuntary alterations in behavior or physical symptoms.
- Complications:
  - SUDEP (Sudden unexpected death in epilepsy)
  - Falls with injury
  - Other traumatic injuries
- Aspiration
- Automobile accidents
- Tongue, lip or cheek injuries related to biting
- Status epilepticus



### Seizures - Symptoms

- The symptoms of a seizure will depend on which area of the brain is affected. Symptoms vary with individuals common symptoms include:
  - Unresponsive or staring
  - Fluttering of eyes or rolling eyes up or in a specific direction
  - Lip smacking
  - Muscle spasms- on one side or full body

- Loss of bladder or bowel
- Numbness or tingling in extremities

26

 Hearing or smelling things that are not there



## Seizures

#### Causes

- Missing doses of anti-seizure medication
- Dehydration
- High fever
- Too high or low blood sugar
- Sensory stimuli (strobe lights, video games)
- Polypharmacy
- Severe constipation

#### **Risk Factors**

- Neurological disorders
- Cerebral palsy
- Down syndrome
- Traumatic brain injury
- Stroke
- Tuberous sclerosis
- Autism
- Infections
- Drugs or toxins
- Brain tumors
- Diabetes



### Seizures - Treatment

- If seizure lasts longer than 5 minutes: Call 911
- If repeat seizure with no return to base: Call 911
- · Ensure the individual's safety during seizure activity
- Documentation that includes: seizure activity, duration and individual's response

- Anti-seizure medications
- Elimination of cause
- Vagus nerve stimulation
- Dietary treatment
- Neurosurgical intervention



### **Seizures Prevention**

- Most seizure disorders cannot be prevented, effective management is key
  - Compliance with medication and monitoring
  - Avoid situations which trigger seizure
  - Avoidance of constipation
  - Avoidance of dehydration
  - Early treatment of infection and fevers
  - Reduce possible complications (do not drive or swim alone)
  - Refrain from use of recreational drugs



30

## Actions to Mitigate the Risk to Individuals

- Review current and/or develop policies and procedures that:
  - Address measures to identify individuals at risk
  - Establish precautions to minimize or eliminate the causes

- Ensure appropriate documentation and accuracy of records
- Establish processes for emergency response and calling 911



### **Staff Education**

- Establish education plan for staff
  - Contains information on identifying the at risk individuals
  - Reviews signs and symptoms
  - Ensures staff competency with all aspects of the individual's care plans
    - Medical evaluations/recommendations, assessments, ISPs, and any other treatment plans used
  - Competency with emergency response



32

## Quality Assurance

- Establish Quality Initiatives program
  - Monitors compliance
  - Establishes policies to address non-compliance
  - Identifies opportunities for improvement
  - Addresses reporting and investigation of incidents



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#### Additional Information and Technical Assistance



34

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