

# Fibreoptic endoscopic evaluation of swallowing (FEES): Therapy or Assessment

<b>Submission date</b> 29/09/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 29/09/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 20/04/2015	<b>Condition category</b> Digestive System	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
N0515163804

## Study information

**Scientific Title**  
Fibreoptic endoscopic evaluation of swallowing (FEES): Therapy or Assessment

**Study objectives**

The hypothesis is that visual & verbal feedback improves the ability of participants to correctly perform specific movements within the pharynx to command. In addition to this I am hypothesising that FEES is a valuable therapeutic tool with regards to comfort, acceptability, time and resources. To date there is no documented evidence supporting the use of Nasendoscopy as a therapeutic tool, despite the obvious clinical benefits.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Not provided at time of registration

### **Primary study design**

Interventional

### **Study design**

Randomised controlled trial

### **Study type(s)**

Diagnostic

### **Health condition(s) or problem(s) studied**

Digestive System: Deglutition disorders

### **Interventions**

Group 1 Participants of the study will be assigned to one of two groups. All participants will be given information about the anatomy of the pharynx and larynx. This will be done using diagrams. With the aid of the diagram, the participant will then be given information about the precise target movements expected of them. These include: Nasopharyngeal closure, tongue base reaction, vocal fold adduction and the posterior pharyngeal wall. The scope will then be passed transnasally to enable three views the nasopharyngeal port, the pharynx and the larynx.

Participants randomised to group 2 will be positioned to allow viewing of their anatomy. The whole assessment process will be videotaped to allow for inter-rater reliability to be established. The participant will be instructed to attempt to each movement in turn and they will be given 3 minutes to perfect this movement. The participant will then be instructed to attempt to perform the movement 5 times consecutively. The movement will be scored as present or absent and a score out of 5 will be given. Group 2 participants will be scoped as before to allow the therapist full view of the movements achieved in the pharynx and this that are not. The participant will not however be able to view the monitor. The participants in this group will receive the same amount of feedback that would normally be available for patients receiving therapy with out the help of nasendoscopy. The investigator will provide them with information about the target movements. Group 2 participants will be given a practice period of 3 minutes per movement. The participant will then be asked to perform the target movements 5 times and the researcher will record the consistency with which they are achieved.

As with group 1, all the assessment results will be recorded on to videotape. The assessment time in total should not exceed 20 minutes. Analysis of the results will be achieved using a chi squared statistical test.

### **Intervention Type**

Other

**Phase**

Not Specified

**Primary outcome(s)**

Measurement of the target movement. Assessment as to whether or not these movements have been achieved will be rate by the principal investigator and the data will be re-rated by a further therapist skilled in this area

**Key secondary outcome(s)**

Not provided at time of registration

**Completion date**

31/03/2006

**Eligibility**

**Key inclusion criteria**

Participants will be selected and randomly assigned into two groups. Each group will consist of 10 healthy volunteers with no history of swallowing difficulties. Participants will be recruited predominantly from staff working at Northwick Park Hospital.

**Participant type(s)**

Healthy volunteer

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

All

**Key exclusion criteria**

1. Patients under 18
2. Patients with swallowing difficulties

**Date of first enrolment**

01/07/2002

**Date of final enrolment**

31/03/2006

**Locations**

**Countries of recruitment**

United Kingdom

England

**Study participating centre**  
**Northwick Park Hospital**  
Harrow  
United Kingdom  
HA1 3UJ

## **Sponsor information**

### **Organisation**

Record Provided by the NHSTCT Register - 2006 Update - Department of Health

## **Funder(s)**

### **Funder type**

Government

### **Funder Name**

North West London Hospitals NHS Trust (UK), NHS R&D Support Funding

## **Results and Publications**

### **Individual participant data (IPD) sharing plan**

### **IPD sharing plan summary**

Not provided at time of registration