



Outcome of Telerehabilitation for Dysphagia Management at Srinagarind Hospital

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Background and Objective: Dysphagia is common complication among individuals with neurological disorders, particularly in stroke patients. It often lead to malnutrition and aspiration pneumonia. Early rehabilitation is crucial to prevent these problems, ensure safe swallowing, and enhance patients' quality of life. However, caregivers are often burdened emotionally, physically, and financially over extended periods, posing significant challenges in long-term care. In the context of continuing medical treatment, this presents a significant challenge. Consequently, in order to enhance patient care and medical service accessibility, the healthcare team has acknowledged and implemented telerehabilitation. This study aimed to evaluate the outcomes of telerehabilitation for patient with swallowing disorder.

Methods: Data were collected with patients at the dysphagia clinic at Srinagarind Hospital who have utilized telerehabilitation services from 2022 to 2024. A total of 76 patients were enrolled. The demographic data, oral health status, Functional Oral Intake Scale (FOIS), and complications were obtained.

Result: The majority of patients were male (67%) and over 85 years of age (44%). The etiology of dysphagia was predominantly attributed to stroke (68%), Parkinson's disease (18%), and head and neck cancer (13%). Following the rehabilitation program, 100% exhibited enhanced oral health status, and 68% had elevated FOIS scores. Approximately 13% encountered aspiration pneumonia. Satisfaction levels were assessed as ranging from high to very good, with a score of 96.73.

Conclusion: Telerehabilitation appears to be an effective and accessible alternative to conventional in person therapy for dysphagia management. However, technology readiness, user participation, and team competence are all factors that should be taken into account because they can influence interpretation, diagnosis, and treatment planning.

Keyword: telerehabilitation, dysphagia, outcome

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