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Rehab device a real lifesaver

Machine helps patients learn to eat again

Jennifer Booth Reed

About 50 people clustered into an outpatient rehabilitation center at Gulf Coast Hospital on Tuesday and did what anyone invited to a luncheon would do: Eat.

Only for these former patients, the simple act was a big deal.

The guests had lost their ability to swallow. They'd come to the practice to recondition the 25 different muscle groups that allow a person to swallow food and drink. The muscles had been damaged for various reasons -- cancers and radiation treatments, strokes and infections.

They had spent weeks or months with speech pathologist Stacey Brill, whose therapy centers on a device called VitalStim, which electronically stimulates the muscles, forcing them to remember how to contract and release. They practice swallowing with the device on. It's the only Food and Drug Administration-approved device of its kind.

Brill said she was trained in VitalStim about three years ago. She said hers was the first hospital-based rehab center in the region to start using it. A search of the company's Web site shows 23 organizations, ranging from other hospitals to nursing homes to rehab centers, offer the therapy within a 30-mile radius of downtown Fort Myers.

Still, Brill said, not all doctors know about it. She's had patients come to her after years of using a feeding tube because no one had told them about the device.

With a success rate of 92 to 95 percent in her practice, Brill scheduled the luncheon to celebrate. Cold cuts, salads and chocolate cake marked the occasion.

"I came from not eating or drinking to eating and drinking," said Charles Ward, 75, of North Fort Myers, who lost his ability to swallow after a near-fatal blood infection he acquired during knee replacement surgery.

He initially tried more traditional physical therapy but it didn't work.

"Stacey got me eating and drinking," he said.

Some of the patients said they still struggled with certain foods like meats, grains and bread. But any ability to eat is better than where they came from.

In the lunch crowd was Mike Rollo, 56, of Estero, who munched on cold cuts and cake. Last January, Rollo was diagnosed with cancer of the tonsils. He had surgery, followed by radiation and chemotherapy.

Doctors gave him a feeding tube in March, and a tracheotomy tube in August after he went into respiratory distress. He just had both removed about three weeks ago.

Recovery from neck- and throat-related diseases is a slow process.

"When I first got here, I couldn't even swallow an ice chip," Rollo said.

He fed himself a liquid nutritional supplement several times a day through the feeding tube. Socialization was out. So were lunch meetings, coffee breaks and the like. Rollo is vice president for student affairs at Florida Gulf Coast University.

He came to therapy three times a week for about 10 weeks. Hooked to the VitalStim machine and under Brill's supervision, Rollo started experimenting with different foods -- yogurt, eggs, ice cream, tuna salad.

Pizza, he said, was a disaster -- the bread took too long to chew and moisten enough to get down. Peanut butter and jelly -- equally bad.

But he's made significant headway in the past six weeks. Rollo went out to eat for the first time Oct. 17 to Bonefish Grill with his wife and visiting friends. He ate Thanksgiving dinner -- turkey, potatoes, pumpkin pie -- with family. He even ate half a sandwich at Beef O'Brady's -- a big deal, he said, because bread is such a challenge.

"It's just hard work," he said. "You've got to chew it and chew it and chew it. It's like taking a pill every time you swallow."

Traditional physical therapy exercises such as pretending to yawn or singing musical scales would take as long as six months before a patient would see progress, Brill said.

"I always call it my magic little box," she said.

Swallowing facts

- Dysphagia, or the loss of the swallowing function, affects as many as 15 million Americans.

- Cancer, radiation treatments, strokes, Parkinson's and amyotrophic lateral sclerosis (ALS) diseases are common causes of the disorder.

- The condition is more prevalent among the elderly.

- Complications include choking, increased infection rate, malnutrition, dehydration, weight loss and social isolation.

-- Encore Medical, L.P.

- See therapy B2

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