

Which factors affect the severity of dysphagia in lateral medullary syndrome?

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Background & Purpose

The Purpose of this study is to identify the factors that relate with the prognosis of dysphagia after lateral medullary syndrome (LMS).

Methods

LMS patients with dysphagia who admitted from Jan 2013 to Dec 2017 were included and divided into two groups (mild vs. severe). Severe dysphagia was defined as the condition that showed decreased bilateral pharyngeal constriction without esophageal passage in a videofluoroscopic swallowing study (VFSS) and initially required enteral tube feeding. Their clinical data (age, sex, lesion side, onset duration, Modified barthel index (MBI), National Institutes of Health Stroke Scale (NIHSS) and anatomical lesion on diffusion-weighted MRI) were statistically compared to find the differences between the two groups.

Results

Twelve patients were shown the absence of esophageal passage among a total of 30 LMS dysphagia. Only the anatomical lesion location and extent was significantly different and the severe group showed more vertical extension and far lateral involvement of medulla. In other factors, there is no differences between the two groups.

Conclusion

The location and the extent of involvement in medulla is considered to be the most important factor in the prognosis of dysphagia after LMS.

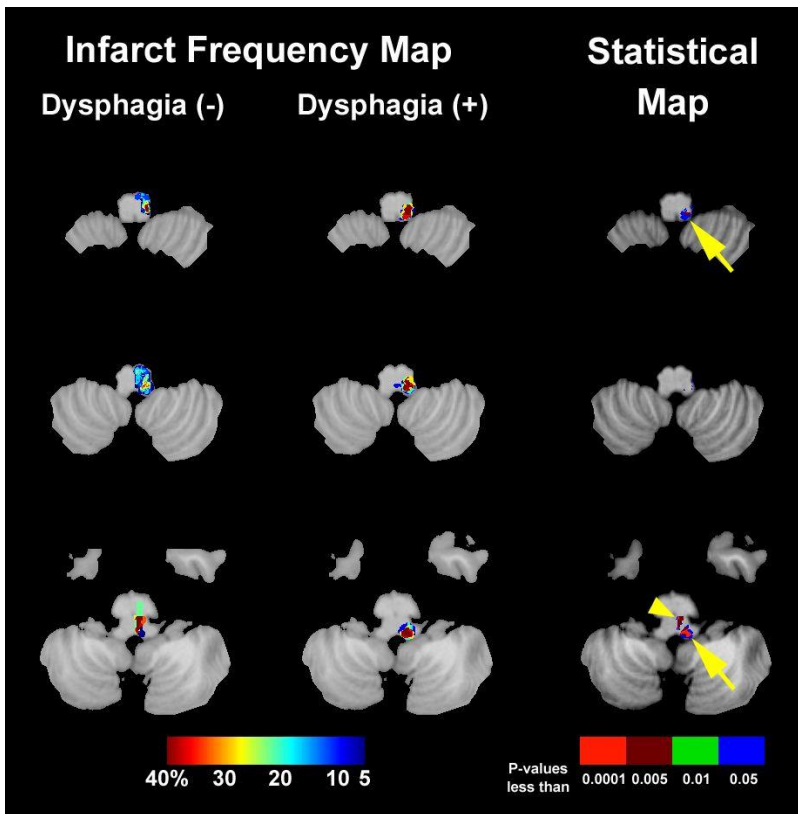


Fig 1. The location and the extent of involvement in 30 lateral medullary infarction patient