

## Guide to Prescribing Thickeners for Adults in Primary Care

Thickeners are used to thicken liquids to various consistencies for patients with dysphagia, slowing the rate of transit allowing more time to co-ordinate the swallowing process safely. This then reduces the risk of fluids entering the lungs causing serious complications e.g. - chest infections, or aspirational pneumonia, and can help to reduce hospital admissions, hospital stays, and death.<sup>1</sup>

In recent years thickeners have evolved from the original starch based format to a new range of gum based thickeners.

**Starch-based thickeners** can be unstable and continue to thicken over time if left to stand, however if mixed with saliva the enzyme amylase breaks down the thickener which thins the fluid, reduces the effectiveness and poses a **safety risk** to the patient. Starch-based thickeners also have a grainy texture and can form lumps when mixed with fluids. The overall reduced palatability of starch based thickeners can reduce adherence and patient hydration.<sup>2</sup>

**Gum based thickeners** are more stable over time and are resistant to amylase and therefore safer. They are less grainy, have a smoother texture and are clear, which makes them more appealing and palatable to the patient. Increased palatability can lead to improved adherence and patient hydration.<sup>2</sup>

**Local SALT teams support the prescribing of gum-based thickeners as first line options in primary care.**

The preferred gum-based thickener for use in adults throughout primary care in Wiltshire is **Nutlis Clear**. Should this not be suitable, other supported gum-based thickeners include: Resource Clear® & Thick & Easy Clear®.

### Key Prescribing Points

- Thickeners should **only be prescribed on the recommendation of a Speech and Language Therapist (SLT)** following diagnosis of dysphagia. SLT advice will depend on the patient's degree of dysphagia, and the consistency of fluid needed is described by new International Dysphagia Diet Standardisation Initiative (IDDSI) descriptors in increasing order of thickness: Level 1 (slightly thick) Level 2 (mildly thick) Level 3 (moderately thick) or Level 4 (extremely thick). In most cases, all fluids consumed should be thickened.
- The table below lists the equivalence of the new IDDSI descriptors to the previously used "stage" descriptors:

<b>STAGE 1 (SYRUP)</b>	<b>STAGE 2 (CUSTARD)</b>	<b>STAGE 3 (PUDDING)</b>
<b>IDDSI LEVEL 2 (MILDLY THICK)</b>	<b>IDDSI LEVEL 3 (MODERATELY THICK)</b>	<b>IDDSI LEVEL 4 (EXTREMELY THICK)</b>

- Sachets should **NOT** be routinely prescribed as these are considerably less cost-effective than tins.
- Ensure that the correct thickener is selected. Preferred gum-based thickeners are always identified by the suffix "**- CLEAR**".
- For patients currently receiving starch-based thickeners, a switch to preferred gum based thickeners should **not** be made without SLT input/re-training because the method of use and preparation can be significantly different.
- **Ideally the same brand of thickener should be used for all residents in care homes. This will minimise the risk of errors and wastage.**
- Advise patients that the manufacturer's instructions **must** be followed and the **scoop provided should be used** to enable the correct texture to be achieved. Note that for gum-based thickeners, the thickener should be **added to a dry cup & then the liquid poured in**, stirring well and allow time to thicken before serving. Extra thickener should not be added afterwards.
- Consider adding the required **IDDSI** consistency descriptor to the prescription instructions, where it has been specified by the SALT.

### Working together:

For queries contact Medicines Optimisation in Care Homes teams via:




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Swindon- [swiccg.moch@nhs.net](mailto:swiccg.moch@nhs.net) or 01793 987667

Wiltshire- [wccg.moch@nhs.net](mailto:wccg.moch@nhs.net)



Review quantities prescribed to avoid waste and over-prescribing. Prescribe one or two tins initially to ensure patient acceptability. The amount of thickener required by each patient will vary and is dependent on how much fluid they drink and which consistency is required. Suggested on-going minimum quantities for one month are given in the table below (quantity based on recommendation of 1600mls fluid/day):

Thickener	Presentation	IDDSI level	Scoops required (per 200ml)	Min. quantity for 1 month	
				Tins	Grams
<b>Preferred Choice:</b> Nutilis Clear <sup>®</sup> (Nutricia) 	175g	1	1	2	350g
		2	2	4	700g
		3	3	5	875g
		4	7	12	2100g
Resource <sup>®</sup> ThickenUp Clear (Nestlé Health Science) 	127g	1	1	3	381g
		2	2	5	635g
		3	4	9	1143g
		4	8	17	2159g
Thick & Easy Clear <sup>®</sup> (Fresenius Kabi) 	126g	1	1	3	378g
		2	2	5	630g
		3	3	8	1008g
		4	6	15	1890g

## References

1. Cichero J.A.Y. Thickening agents used for dysphagia management: effect on bioavailability of water, medication and feelings of satiety. Nutrition Journal 2013; 12: 54. <http://www.nutritionj.com/content/12/1/54>
2. Prescqiip Bulletin: <https://www.prescqiip.info/media/1192/b188-care-homes-assisting-people-with-swallowing-difficulties-20.pdf>
3. CQC <https://www.cqc.org.uk/guidance-providers/adult-social-care/dysphagia-thickening-powders>
4. NHSE Patient Safety Alert Feb 2015: <https://www.england.nhs.uk/wp-content/uploads/2015/02/psa-thickening-agents.pdf>

## Working together:

NHS Bath and North East Somerset Clinical Commissioning Group

NHS Swindon Clinical Commissioning Group

NHS Wiltshire Clinical Commissioning Group

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