Challenges of administering oral medications to older people with swallowing difficulties: A hard pill to swallow?


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Background Difficulty swallowing medications is a major issue among older people. It complicates medication administration and may lead healthcare professionals to use inappropriate and unsafe administration methods e.g. crushing tablets, opening capsules. However, underlying reasons for sub-optimal practices are not understood.

Purpose The study aimed to investigate opinions and experiences of healthcare workers in Australian aged care facilities in relation to 1) barriers and challenges surrounding the practices of oral medication administration to aged care residents with swallowing difficulties, and 2) facilitators to improve these practices.

Method An online survey comprising of multiple choice and open-ended questions was designed based on a systematic review of existing literature, and findings from a previous qualitative interview study. The survey link was sent to an email database of aged care facilities across Australia from August to October 2018. Aged care staff of varying professional levels e.g. managers, nursing directors, registered nurses, enrolled nurses, and assistants in nursing/carers involved in administering medications to residents were invited to complete the survey. Quantitative data were analysed and reported descriptively. Qualitative data were analysed using qualitative content analysis.

Findings A total of 241 surveys were completed. Most respondents (90.46%) reported having administered medications to residents with swallowing difficulties, with 89.63% modifying medications (crushing tablets/opening capsules) every day. The main reasons for modifying medications were swallowing difficulties (97.45%), behavioural issues such as refusal and aggression (59.57%), mental/psychological conditions (51.06%), and orders from other healthcare professionals (40.85%). The most common barriers identified were time constraints (57.62%), workload/staffing (57.22%), and overlooking swallowing abilities at prescribing stage (13.17%). Pill size (94.61%), polypharmacy (73.03%), and unavailability of alternative formulations (70.12%) were stated as additional contributing factors/challenges. The most common strategies to facilitate patient medication swallowing were medication modification (94.96%), requesting a change to alternative formulations (87.82%), and behavioural interventions such as verbal encouragement (77.73%). The most common facilitators to improving practice included receiving support from other healthcare professionals such as doctors and speech pathologists (91.28%), medication reviews by pharmacists (87.14%), and receiving training on medication administration in swallowing difficulties (83.40%).

Conclusion Aged care healthcare workers face numerous barriers in managing medication administration in residents with swallowing difficulties. Targeted interventions such as pharmacist-led medication reviews, educational interventions for different groups of healthcare workers, design of age-appropriate formulations, and improving communication among the multidisciplinary care team are needed to support aged care staff.