Let's Talk

About Your Swallowing Study: Endoscopy

Have You Been Told You Should Have a Swallowing Study Done?

Your speech-language pathologist (SLP) may have told you to take this test so he or she can figure out how well you swallow. It is also called a swallowing study.

A swallowing study is done by putting a special tube down your throat. This tube is called an endoscope. Other tests may also be done during the swallowing study.

Why Do I Need a Swallowing Study?

The SLP may use special equipment to see what is happening inside your throat. The SLP may see where food is going in the wrong place or not getting to your stomach.

Other tests can help the SLP find out:

- What part of your mouth and throat may not be working well.
- If food is going the wrong way (into your airway instead of your stomach)
- Which parts of your mouth and throat may not be working well
- If certain positions or strategies help you swallow better
- What kinds of food are safest for you to swallow
- What your swallowing will be like when you eat and drink more

Swallowing Study Done?

Your swallowing test is usually recorded so that it can be watched again later.

The SLP may use special equipment to see what is happening inside your throat. The SLP can’t see what happens inside your throat during an examination. Other tests can help the SLP find out:

- What part of your mouth and throat may not be working well
- If food is going the wrong way (into your airway instead of your stomach)
- Which parts of your mouth and throat may not be working well
- If certain positions or strategies help you swallow better
- What kinds of food are safest for you to swallow
- What your swallowing will be like when you eat and drink more

Talking With a Tracheostomy or Ventilator

Do You Have Trouble Speaking?

Your speech-language pathologist (SLP) can help you find ways to communicate. He or she can help you find a way to talk without a breathing tube in your throat or nose.

- Apraxia
- Aphasia
- Augmentative and alternative communication (AAC)
- Dementia
- Dysarthria
- Endoscopy
- Laryngectomy
- Oral cancer
- Paradoxical vocal fold movement
- Parkinson’s disease
- Spasmodic dysphonia
- Swallowing
- Stroke
- Tracheostomy and ventilator dependence
- Traumatic brain injury
- Videofluoroscopy
- Vocal fold paralysis
- Vocal nodules