Late Radiation-Associated Dysphagia (Late RAD): Information for the Primary Care Network

What is Late RAD?

- Swallowing difficulty 5-40 years after head and neck radiation
- A relatively rare (3-8%) new or progressive onset of severe oropharyngeal dysphagia following a long period of stable functioning
- Severe physiologic impairment to swallow, including significant inefficiency, aspiration, progressive dysfunction and potential secondary pneumonia
- Late RAD progresses more quickly if NPO; continued swallow exercise through eating is important to slow progression

The Missing Link

• Since late RAD is not well-known, often the healthcare team will not make the link between new onset dysphagia and head and neck radiation that happened years or even decades ago

Next Steps

- Rule out medical causes for the patient's dysphagia such as recurrent disease or a new primary cancer (ENT referral), or other medical issue
- Then, refer to BC Cancer- Victoria SLP for assessment and management of late RAD
- Management by SLP includes therapy to address airway protection, airway clearance, and/or swallow efficiency as well as education and counselling

Referral to BC Cancer-Victoria SLP

Refer directly by phone, fax or email

• Phone: 250-519-5722 or 250-519-5607

• Fax: 236-429-3633

• Email: lisa.kuhn@bccancer.bc.ca or hilary.cochrane@bccancer.bc.ca