Introduction and Background

**Grave’s disease (GD),** an autoimmune disorder, is one of the main causes of hyperthyroidism.

A **key feature** of GD is an **enlarged thyroid** or diffuse goitre.

**Dysphagia** may be a common experience for people with GD for 3 reasons; the thyroid gland location, its size increase and treatment options including thyroidectomy surgery.

Methodology

**Aim:** Explore the role of the SLT in the assessment and management of GD in adults.

**Database Search:** Embase, PubMed, Web of Science, PsycINFO, Cinahl, from 2007 to 2017.

**Search terms:** MESH terms were supplemented with free-text words.

**Excluded:** Articles including participants with comorbid autoimmune disorders

Results

15 **studies** were identified using the search parameters outlined above.

Analysis of these studies suggests that in current clinical practice, the SLT is **absent** in the dysphagia assessment and management process.

However, a number of **emerging trends** were evident, including:

1. Patients with GD are **involved in the surgery options process**.
2. There is increasing interest in the **subjective experience of dysphagia symptoms**.
3. At present, the **potential role of the SLT** in supporting these patients both **pre and post-operatively** has been acknowledged and is developing.

Conclusions and Recommendations

Dysphagia appears to be a **common symptom** in GD.

**Further research is needed** on the role of the SLT in the management of dysphagia symptoms in GD.

Recommended Reading: