

**Critical Review:
Is a chin-down posture more effective than thickened**

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This critical review examines dysphagia management strategies and their ability to effectively eliminate aspiration for patients with Parkinson's disease. Three studies were reviewed, including two randomized control studies and a single-group (post) test only. Overall, the research does not provide sufficient evidence to support that a chin-down posture is more effective at eliminating aspiration when compared to thickened liquids, for patients with Parkinson's disease. The research does suggest that thickened liquids immediately eliminates the risk of aspiration. The long-term effectiveness of this treatment is not known. The findings from this review pose several recommendations to improve future research, including more detailed participant charact500440 Tm(-)]TJ.4 Tm0 g06, u

The procedures outlined by the authors are highly detailed, which allows for the possibility of easy replication of this study. However, there is no specific operational definition of aspiration mentioned. It is unclear whether all the local clinicians examining the videofluorographic images were following a consistent description of aspiration. A tool such as the Penetration-Aspiration Scale (Rosenbek et al., 1996) would increase the reliability of the examinations across all the participants. There is also no mention of interrater reliability, which further compounds this issue.

The authors appropriately used the McNemar test of classification, which is useful when comparing non-parametric data in “before and after experiments” (Marques de Sá, 2007), which in this study, refers to the absence/presence of aspiration was before and after the treatment method was applied.

A positive aspect of this study is the patient preference information. While effective dysphagia management techniques that eliminate aspiration are important, it is also pertinent to consider patient preferences i

blinded to the participants' identity. The

which patients will be monitored. In addition to this, the authors also did not consider other predictors of pneumonia. It has been well documented by Langmore et al