

Oropharyngeal dysphagia and its psychiatric comorbidities

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Valorization addendum

The studies presented in this thesis were designed to provide insight in psychiatric (co)morbidity in patients with OD and to provide guidance for OD caregivers. OD, which basically means the inability to eat and drink normally, affects over 40 million people in Europe.⁴¹ The financial impact of OD is substantial.^{42,43} OD has various underlying etiologies, including stroke, progressive degenerative neurological diseases, and oncological diseases, and may cause severe complications.^{1-4,44} In recent decades, this problem has been gaining attention worldwide and high-quality research has been done, mainly concerning the diagnostic trajectory and treatment strategies for OD patients. Although the literature suggests a high impact on OD patients' health-related quality of life, knowledge about mental distress in OD patients is scarce and discussions of the psychological burden remain speculative.

The recommended integrated approach to the OD patient is a multidisciplinary one, involving different caregivers including medical specialists (otorhinolaryngologists, neurologists, psychiatrists, radiologists, oncologists, etc.) and allied health professionals (speech-language pathologists, dieticians, nurses, etc.). In this thesis, we propose developing an integrated psychosomatic approach by adding a staff-guided mental-healthcare worker to this multidisciplinary team. To that end, the results of this thesis are not only of relevance for ENT specialists and psychiatrists but for all professionals involved in the long-lasting trajectory of OD care.

This thesis offers deeper insight into the high prevalence of mental health issues in OD patients, but it also draws attention to psychiatric problems in patients with various ENT complaints. However, prospective longitudinal studies are needed to understand mental distress in the ENT population more fully. Better understanding must underpin efforts to improve patients' healthcare status and rehabilitation outcome, which will in turn lead to decreased healthcare utilization and costs. Unfortunately, financial resources and grants are scarce in this field; consequently, little fundamental research or research of clinical relevance has been done. We hope that this thesis will lead to greater awareness among caregivers of the mental health issues that accompany OD, to more research in this field, and to better management strategies, all in order to better help this complex category of patients. Future models of integrated OD care certainly deserve to be considered for research grants.