Update on the evaluation and management of dysphagia in sporadic inclusion body myositis

**KEY POINTS**

- Attempts were made to improve the guideline for intubating patients aimed at reducing incidence of not needed intubation.
- Antimicrobials still remain the standard facial burn wound care despite newer wound care products.
- Escharotomy for the face using the facial aesthetic units was described and is thought to aid subsequent skin grafting.
- Self-retaining and expandable stents could be used to reduce incidence of nasal stenosis.
- 3D printing could make a deference producing customized face mask in facial scar management.

**REVIEW**

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**Abstract**

**Purpose of review**

Dysphagia is a common symptom of sporadic inclusion body myositis (IBM), affecting disease trajectory and patient quality-of-life. Despite this, it is considerably understudied. The purpose of this review is to summarize current evidence related to the evaluation and management of dysphagia in IBM. We highlight a patient case involving a multidisciplinary management approach, and we encourage continued exploration of exercises for delaying progression and improving impairments in patients with IBM and dysphagia.
Recent findings

Recent investigations confirm that dysphagia in IBM is a debilitating and complex symptom that warrants timely evaluation and management. Further, they highlight the lack of validation of standardized swallowing-related metrics specifically for IBM and the limited evidence supporting a consensus of management approaches. Small scale research and clinical anecdotal data support a multidisciplinary and multipronged patient-centered approach, including rehabilitative exercise protocols, for dysphagia management in IBM.

Summary

A paucity exists in the literature to effectively guide clinical decision-making for patients with IBM and dysphagia. Given this, it is our belief that a careful multidisciplinary and multipronged patient-centered approach is critical for dysphagia management in IBM. Prospective, longitudinal research on the underlying mechanisms of swallowing dysfunction using advanced and validated swallowing-related outcome measures is urgently needed.
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