

POSITIVE EFFECTS OF RESOURCE® THICKENUP® Clear ON SAFE SWALLOWING IN PATIENTS WITH OROPHARYNGEAL DYSPHAGIA (OD) HAVE BEEN DEMONSTRATED IN MULTIPLE STUDIES. 1-6



While RESOURCE® THICKENUP® Clear belongs to a class of **GUM-BASED THICKENERS**, it is a unique, patented 'clear' thickener.

RESOURCE® THICKENUP® Clear **ENSURES SAFE SWALLOW EFFICACY** as measured by clinical signs (cough, voice changes, decrease in oxygen saturation) and videofluoroscopy (prevalence of safe swallows, penetration/aspiration, presence of residue).^{1,3}

RESOURCE® THICKENUP® Clear **DOESN'T PRODUCE ORAL OR PHARYNGEAL RESIDUE**, which contributes to the reduced risk of aspiration.^{1,3}

NO GASTROINTESTINAL REPORTED SYMPTOMS in compliance trial.⁴

TRANSPARENT AND TASTELESS,

leading to compliance of thickened product⁴ and quality of life.⁵

HEALTHCARE PROFESSIONALS WHO CARE FOR DYSPHAGIA PATIENTS USE RESOURCE® THICKENUP® Clear FOR ITS PRODUCT FEATURES, INCLUDING UNIQUE XANTHAN GUM PROPERTIES.⁵



RESOURCE® THICKENUP® Clear IS EASY TO PREPARE; IT DISSOLVES AND THICKENS RAPIDLY IN ANY LIQUID.7

Liquids thickened with RESOURCE® THICKENUP® Clear are

LUMP FREE, MAINTAIN VISCOSITY LEVEL OVER TIME AND KEEP NATURAL APPEARANCE.^{2,7}



94% OF DYSPHAGIA PATIENTS LIKED DRINKS MODIFIED WITH RESOURCE® THICKENUP® Clear. Positive acceptance was based on sensory characteristics of the thickened fluids in a study of nursing home residents.⁴

Healthcare providers find RESOURCE® THICKENUP® Clear **EASY TO USE AND ACCEPTABLE TO PATIENTS** particularly regarding clearness of the thickened fluids.⁴





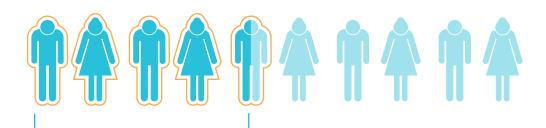
Dietary thickened food and fluids can **IMPROVE** patient recovery times, nutritional status and **QUALITY OF LIFE.**8

RESOURCE® THICKENUP® Clear has the potential to be a **COST-EFFECTIVE** intervention in the management of OD.



BURDEN OF OROPHARYNGEAL DYSPHAGIA.

Oropharyngeal dysphagia is a common and burdensome condition characterised by swallowing difficulty.9



40-50% OF
RESIDENTS
IN ELDERLY RESIDENTIAL
AGED CARE FACILITIES
are diagnosed with dysphagia.¹⁰



LOW DIAGNOSIS RATE FOR DYSPHAGIA is a source of concern; approximately 75% of cases remain undiagnosed.9



OD IS ASSOCIATED WITH a host of underlying conditions including **NEUROLOGICAL DISORDERS** (stroke and neurodegenerative disease) and frailty.⁹

Patients with OD **LOSE THE ABILITY TO EAT NORMALLY,** leading to isolation and reduced quality of life. 11-12

OD is a MAJOR RISK FACTOR FOR MALNUTRITION AND DEHYDRATION and can lead to aspiration PNEUMONIA and associated MORTALITY. 12-15



THE EXCESS HEALTHCARE COSTS ASSOCIATED WITH OD

are related to hospital readmissions, emergency room visits, long-term institutional care, and the need for respiratory and nutritional support. $^{16-19}$

OD has been shown to **NEGATIVELY IMPACT HOSPITAL LENGTH OF STAY (+1.6 DAYS).** 19

OD and its complications place a significant **ECONOMIC BURDEN ON HEALTHCARE SYSTEMS.**16-19

NUTRITIONAL MANAGEMENT OF OROPHARYNGEAL DYSPHAGIA.



KNOWN BENEFITS OF DIETARY THICKENED FOOD AND FLUIDS:



OD management aims to **REDUCE THE RISK OF ASPIRATION** and associated pneumonia and to prevent incidences of malnutrition and dehydration.^{1,9}



Dietary thickened food and fluids are a mainstay of nutritional management of OD and has been shown to **IMPROVE SWALLOWING SAFETY AND EFFICACY.**²⁰⁻²⁶



Modification of dietary thickened food and fluids are performed by adding thickening agents to thin liquids in order to ACHIEVE APPROPRIATE CONSISTENCY OF LIQUIDS OR SOLID FOODS.^{22,23}

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