



## Introduction

### Background

- Swallowing difficulties may lead to serious complications such as pneumonia, malnutrition, and dehydration (González-Fernández et al., 2013).
- Airway protection mechanisms including laryngeal elevation is vital for preventing aspiration of ingested materials into the lungs (Jafari et al., 2003).
- Swallowing exercises like effortful pitch glide are supported by studies to have effect in strengthening muscles that supports laryngeal elevation (Miloró et al., 2014).
- Patient compliance to long-term swallowing exercises is only 40% (Shinn et al., 2013).

### Purpose

- The purpose of this study was to examine the pitch glide exercise game developed by the Swallowing Research Laboratory's effectiveness in improving participant's adherence to the exercise routine.

### Hypothesis

- It is anticipated that participants in the group with game-based oromotor exercise (OME) will have higher adherence in carrying out OME at home than participants in group with traditional OME.

## Method

### Inclusion criteria

- Do not have self-reported or diagnosed with speech problems or swallowing problems or impaired oromotor function;
- Aged 18 or above;

### Participants

- 24 healthy participants aged 18 - 88 years were recruited from the community.
- 4 was excluded from data analysis due to mistake in instruction delivery to ensure findings accuracy.

### Procedure

- Day 1**
- Participants' laryngeal function were assessed through oromotor tasks
  - Instructed to practice effortful pitch glide exercise 5 sets of 5 per day (25 trials/day)

#### Experimental Group

- Practised with games for 7 days
- Automatic in-app log

#### Control Group

- Practised with written instruction for 7 days
- Self-filled paper log

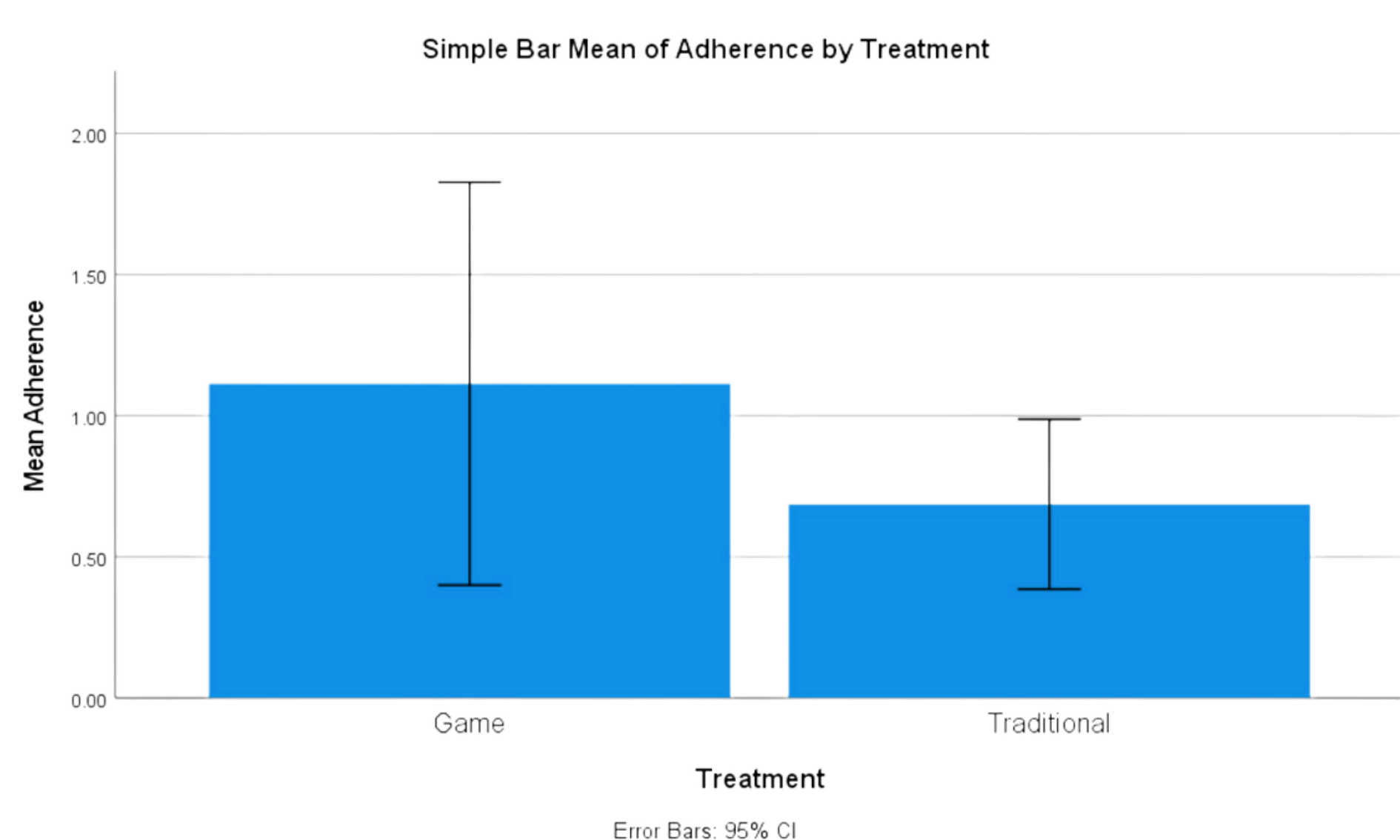
#### Day 8

- Participants' laryngeal function were assessed again
- Complete questionnaire

## Result

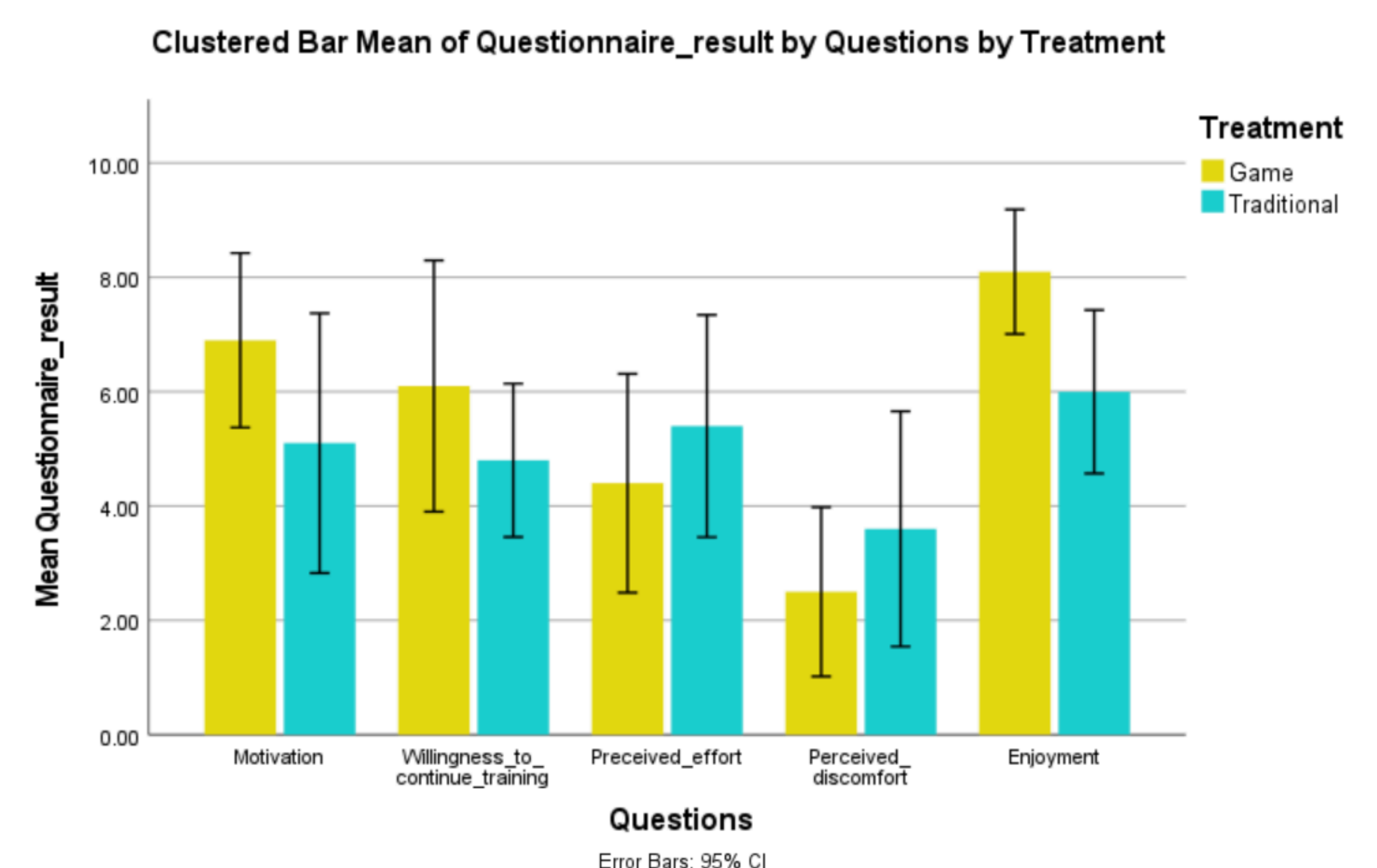
### Adherence

- For adherence, the game-based OME group reported higher adherence than the traditional OME group (game-based M = 1.11, SD = 1, traditional M = 0.69, SD = 0.42).
- This difference was not statistically significant;  $t(18) = 1.25$ ,  $p = .23$ ; and represented a medium-sized effect ( $d = .56$ ).



### Questionnaire

- The game-based OME group reported the incorporation of games into exercises, the reward system, provision of encouragements and points system as major motivators to completing the oromotor exercises.



## Conclusion

### Discussion

- The result suggested that game-based oromotor exercise may contribute to higher adherence rate among participants.
- Game-based oromotor exercise may lead to better treatment outcomes as it is discovered that patients who can consistently perform swallowing exercises have a lower risk of developing stenosis, receiving a G-tube, or worsening their diet (Duarte et al., 2013).

### Recommendations for future research

#### Recruit participants with swallowing disabilities

- it is recommended that participants with conditions such as stroke, Parkinson's disease and head and neck cancer that led to dysphagia be seek out for investigation.
- Help gain insight on gamified swallowing exercise's effect in clinical use.

#### A longer training period for the participants

- Studies have noted that swallowing intervention was often provided five times per week for 4 weeks (Choy et al., 2022).
- a longer training period can reflect intervention use in typical clinical practice.

### Clinical implications

- It is suggested that clinicians should incorporate more game elements in swallowing intervention for adults to increase adherence and improve treatment outcomes.

