

DYSPHAGIA EARLY DETECTION INITIATIVE

Getting the Right Swallowing Evaluation

A patient guide to MBSS and FEES — the two studies that actually see your swallow

If you've been told your swallowing "seems fine" at a provider appointment, that may not be the full picture. Many people with myositis experience changes in swallowing strength or coordination. They may aspirate food or liquid with a cough present, or it may occur silently, as the aspirate enters the airway without triggering a cough. No one can see silent aspiration from across an exam room. The only way to know what's really happening is to actually look. That's what these two studies do.

First step: the clinical swallowing exam

An SLP will watch you eat and drink to assess the strength and movement of your mouth and throat muscles and to screen for potential risk. They should complete a cranial nerve assessment and an oral mechanism exam in which they observe and test how the different parts of your mouth and throat work. It's a valuable starting point, but it cannot see inside your throat. A clinical swallowing exam cannot rule out silent aspiration.

MBSS (Modified Barium Swallow Study): A live X-ray of your swallow.

You eat and drink foods mixed with a contrast material while the SLP and radiology team watch as liquids and food travel in real time from your mouth, through the throat, and into the esophagus. It shows exactly where swallowing becomes less efficient and whether anything enters the airway.

- Completed in a hospital or imaging center
- Typically takes between 15–30 minutes
- Involves a small amount of radiation
- Barium is used to coat the foods and liquids so they can be easily viewed on the x-ray

FEES (Fiberoptic Endoscopic Evaluation of Swallowing): A direct camera view while you eat real food.

A thin, flexible camera is gently passed through your nose so the SLP can directly see your throat from above as you eat and drink.

- Can often be done in the speech therapist's clinic
- Typically takes between 15-30 minutes
- No radiation involved so there's no time limit. The SLP can watch how your swallow holds up across a full meal as fatigue sets in. That matters in myositis.
- Food dyes (typically green and blue) are used to color the foods and liquids so they are more visible on camera.
- Can use your real food and drink preferences along with your own medications
- The study is reviewed frame-by-frame to assess safety and efficiency of the swallow

MBSS vs. FEES at a Glance

MBSS	FEES
What it is: a moving X-ray (videofluoroscopy) of your swallow	What it is: a thin camera through the nose viewing the throat directly
What it shows: the whole swallow in motion — mouth, throat, and esophagus	What it shows: the throat before and after each swallow
Radiation: yes, a small amount	Radiation: none
Where: hospital or imaging suite	Where: clinic or hospital
Food used: foods mixed with contrast material	Food used: food and drinks mixed with food dye
Time: brief imaging window to decrease radiation exposure	Time: no set-up limit. We can observe a full meal and effects of fatigue
Best at viewing: esophageal and oral phases along with whole-swallow timing	Best at viewing: residue, secretions, and fatigue across a meal. Oral and pharyngeal phase of the swallow

Which one do you need?

They show different but complementary things, and both are gold standard. The best study is the one easily accessible and **available in your area**. If both are available to you, ask your SLP what they recommend based on your current symptoms.

How to ask:

"I am having a hard time swallowing. I would like a referral for either a FEES or an MBSS to have my swallowing evaluated."

"My EAT-10 score is [your number]. Does that warrant instrumental evaluation?"

If you have myositis and swallowing symptoms, or an EAT-10 score of 3+, ask for the instrumental evaluation by its name (MBSS or FEES).

Educational content developed for the Dysphagia Early Detection Initiative by
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This handout does not replace individualized evaluation by a speech-language pathologist or your medical team.

Myositis Support and Understanding

