Diet – Soft Diet

Purpose – to alter foods so they can be successfully and safely swallowed.

a. Nutrition Indicators – a loss of body weight due to anorexia and abnormal labs are nutritional indicators for a patient to begin a soft diet.

b. Criteria to Assign the Diet – adequate dentition and mastication by the patient are required for this diet. Patients must also be able to tolerate mixed textures.

c. Rationale for Diet – this diet is a transition to a regular diet.

Population – The textures of this diet are appropriate for individuals with mild oral and/or pharyngeal phase dysphagia. Patients should be assessed for tolerance of mixed textures. It is expected that patients on this diet tolerate mixed textures.

a. Overview

Dysphagia or difficulty swallowing can be a medical or feeding issue at any age; however, it is particularly prevalent in older individuals. Identification of dysphagia is completed using medical history, clinical observation, and physical examination.

Dysphagia is not a disease, but rather a disruption of a normal swallowing process. Without effective treatment, it can lead to:

- Malnutrition
- Aspiration pneumonia
- Dehydration
- Unintended weight loss
- Depression
- Mortality
- Pneumonia (pulmonary complications)
- Decreased rehabilitation potential
- Decreased quality of life
- Increased length of hospital stay
- Increased cost

b. Disease Process

Swallowing disorders are commonly seen in patients with the following conditions:

- Neurodegenerative disorders such as:
  - Parkinson’s disease
  - Multiple sclerosis
  - Guillain-Barre
  - Huntington’s disease
  - Poliomyelitis
  - Post-polio syndrome
  - Amyotrophic lateral sclerosis
  - Multiple dystrophies
• Alzheimer’s disease
• Bulbar palsy

- Neuromuscular disorders such as:
  - Spastic motor disorders
  - Achalasia
  - Scleroderma
  - Myasthenia gravis
  - Amyloidosis
  - Chagas disease
  - Eaton-Lambert syndrome
  - Botulism

- Esophageal cancer
- Type 1 diabetes, long-term
- Head and neck cancer
- Goiter
- Pharyngeal pouch
- Prebyphagia – swallowing difficulty of old age
- Cardiovascular accident
- Gastroesophageal reflex (GERD)
- Esophageal varices
- Inflammatory masses
- Head injury

Aging also increases the risk for dysphagia.

c. **Biochemical and Nutrient Needs**

Dietary guidelines for people with dysphagia, with the exception of those who have outstanding medical issues, are similar to those for the health population. The following recommendations should be used for daily food consumption:

- **Fats, oils, and sweets**
  - Use sparingly
- **Milk, yogurt, and cheese**
  - 2-3 servings
- **Meat, poultry, fish, etc**
  - 2-3 servings
- **Vegetables**
  - 3-5 servings
- **Fruits**
  - 2-4 servings
- **Bread, cereal, rice, pasta**
  - 5-7 servings
General Guidelines

a. **Nutrition Rx**
   Nutrition prescription should specify texture for both food and fluids.
   Foods should be soft and easy to chew and swallow. Food is almost of a regular texture but excludes very hard, sticky, or crunchy foods. Foods should be moist and of bite sizes (1/2 inch or smaller).

b. **Adequacy of Nutrition Rx**
   Dietary guidelines for people with dysphagia, with the exception of those who have outstanding medical issues, are similar to those for the health population.

c. **Goals** – goals for the patient are:
   1) Demonstrate the ability to swallow without evidence of airway penetration
   2) Demonstrate the ability to swallow both solids & liquids without coughing or choking
   3) Demonstrate adequate nutrient intake and hydration:
      - Maintenance of body weight
      - Nutrient-related laboratory values within normal limits

d. **Does it Meet DRI** – Yes. The only target nutrient levels that may be exceptions to the DRI are those that would be affected as a result of the disease state or prescribed drugs.

Education Material

a. **Nutrition Therapy**
   Educational material needed for:
   - Cooking and preparation
   - Foods recommended
   - Foods to avoid in diet

b. **Ideas for Compliance**
   Monitor food intake with 24-hour recall, food diary, or food frequency questions
   Need to observe acceptable and nutritional adequacy of the meal plan
If patients are unable to consume at least 50% of nutrient needs, the insertion of a percutaneous endoscopic gastrostomy (PEG) may be needed to allow the patient to receive adequate nutrition while stabilizing intake from the mouth.

Sample Menu

a. **Foods Recommended**

<table>
<thead>
<tr>
<th>Food Group</th>
<th>Foods Allowed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dairy</td>
<td>Milk and milk beverages, yogurt drinks, cottage cheese, ricotta, soft cheeses, cheese sauce, sour cream</td>
</tr>
<tr>
<td>Desserts and sweets</td>
<td>All soft desserts, avoid nuts and hard candies</td>
</tr>
<tr>
<td>Fats</td>
<td>Gravy, sauces, margarine, butter</td>
</tr>
<tr>
<td>Fruits</td>
<td>Most fresh, canned, or frozen fruits and fruit juices</td>
</tr>
<tr>
<td>Grains</td>
<td>Soft breads, graham crackers, cooked and cold cereals in milk, waffles, pancakes, rice, pasta, toast without crust if tolerated</td>
</tr>
<tr>
<td>Meats and meat</td>
<td>Moist, shaven, tender meats with gravy or products made with ground meats, meat salads, macaroni and cheese, soft sandwiches, casseroles made with allowed foods, smooth peanut butter</td>
</tr>
<tr>
<td>substitues</td>
<td></td>
</tr>
<tr>
<td>Soups</td>
<td>Well cooked with small pieces</td>
</tr>
<tr>
<td>Vegetables</td>
<td>Well-cooked or canned vegetables, skinless soft potatoes, chopped/grated spinach and lettuce, slice cucumber</td>
</tr>
<tr>
<td>Other</td>
<td>Honey, sugar, syrup, fruit jellies</td>
</tr>
</tbody>
</table>

b. **Foods to Avoid**

<table>
<thead>
<tr>
<th>Food Group</th>
<th>Foods Not Allowed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dairy</td>
<td>Hard cheeses</td>
</tr>
<tr>
<td>Desserts and sweets</td>
<td>Any with nuts or coconut, fried foods, jams, marmalades, hard or sticky candies</td>
</tr>
<tr>
<td>Fruits</td>
<td>Uncooked or dried fruits, any fruits with seeds or tough skins</td>
</tr>
<tr>
<td>Grains</td>
<td>Coarse whole grains, any grain foods with nuts or seeds</td>
</tr>
<tr>
<td>Meats and meat</td>
<td>Any tough, fried, or stringy meat, hot dogs, cold cuts, sausage, chunky peanut butter, dry beans or peas, raw or fried eggs</td>
</tr>
<tr>
<td>substitues</td>
<td></td>
</tr>
<tr>
<td>Vegetables</td>
<td>Any fried vegetables, raw vegetables if not tolerated</td>
</tr>
<tr>
<td>Other</td>
<td>Nuts, coconut, seeds, popcorn</td>
</tr>
</tbody>
</table>
c. **Example of a meal plan**

**Breakfast:** ½ cup orange juice at the prescribed liquid consistency  
½ cup well-moistened dry cereal with ¼ cup of milk  
1 scrambled egg with cheese on a moist biscuit  
8 oz milk and other drinks that have the prescribed liquid consistency

**Lunch:** 1 cup of moist beef stew in small chunks with variety of well-cooked vegetables  
1 slice moistened bread with butter or margarine  
½ cup canned fruit salad  
½ cup pudding with a moist cookie  
8 oz milk and other drinks that have the prescribed liquid consistency

**Dinner:** ½ cup potato soup made with milk at the prescribed liquid consistency  
1 slice moistened bread with butter or margarine  
3 oz moist chicken on ½ cup soft-cooked rice  
½ cup green beans  
1 slice apple pie with moist crust, cheese wedge, and ice cream  
8 oz milk and other drinks that have the prescribed liquid consistency

*Nutrition Analysis:* 2,433 calories, 103 g protein (17%), 285 g CHO (46%), 101 g fat (37%), 456 mg cholesterol, 4,612 mg sodium, 12 g fiber

**Websites**

a. Organizations with Websites

*eMedicine Instance Access to the Minds of Medicine:*  

*International Scleroderma Network:*  
[http://www.sclero.org](http://www.sclero.org)

b. Government Websites

*Nutrition and Your Health - Dietary Guidelines for Americans:*  

**References**

a. Journal articles references

AHRQ. Diagnosis and Treatment of Swallowing Disorders (Dysphagia) in Acute-Care Stroke Patients. *AHRQ Commissioned ECRI report.* 1999

Adeleye B, Rachal C. Comparison of the rheological properties of ready-to-serve and


