

# Mealtimes & Swallowing

Mealtimes can become one of the more challenging parts of the day as Parkinson's progresses. Using utensils or managing food may take more effort, and chewing or swallowing may need more time or attention. Appetite or weight may also change over time.

**This chapter shares practical strategies and tools to help make mealtimes and swallowing easier and safer.**

## Mealtimes self-check

The list below highlights challenges that may develop or become more noticeable as Parkinson's symptoms change over time. Use it to help identify strategies in this chapter and guide conversations with your care team.



**Check off any that apply to you:**



Difficulty getting food from the plate to the mouth



Keeping food on the plate while eating



Feeling too fatigued to finish a meal



Food feeling stuck or taking more effort to swallow



Food or drink going down the wrong way (coughing or choking)



Reduced appetite



Losing weight without trying

What other challenges have you noticed?

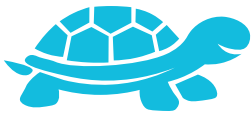
# Top Tips for Safer, Easier Mealtimes

Use these tips as a guide and adjust based on your needs.



## Support your body while eating or swallowing pills

Sit as upright as you can, even if you need to use cushions or wedges. This can support digestion and swallowing



## Slow your pace

Small bites and sips, thorough chewing and taking your time while eating can make meals safer and less tiring



## Eat during “on” times

Meals may feel easier when medication is working well and movement feels smoother



## Choose foods that are easier to handle

Foods that stay together or can be picked up easily may be easier to handle



## Reduce the chance of spills

Use a cup that feels steady, such as one with handles or a lid



## Rinse and brush after meals

Protects teeth and gums and lowers the risk of lung infections for people with swallowing difficulties

### Care Partner Tip

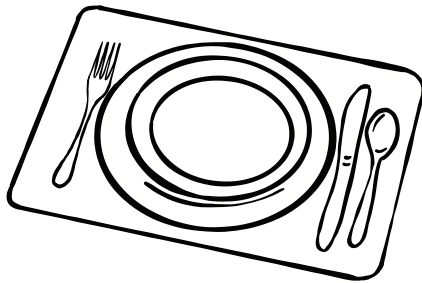
If you are helping with meals, allow extra time and avoid rushing. Reheating food or offering smaller portions may help if meals take longer. A calmer pace can reduce stress.

## Mealtime Tools

Your needs and preferences are unique to you and may change over time. An occupational therapist, speech therapist or another member of your care team can help you find tools that work best for you.

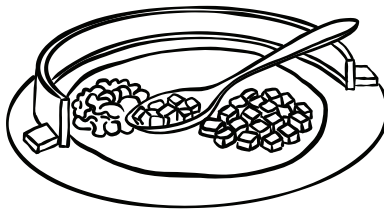
### **Nonslip placemats**

Made from material like rubber or silicone to keep plates and bowls from sliding



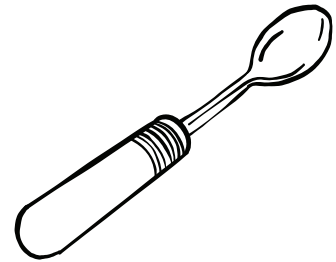
### **Plates with guards or raised edges**

Help keep food on the plate and make it easier to scoop food onto a spoon or fork



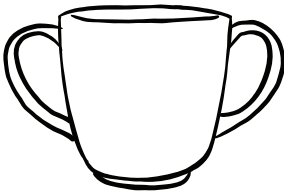
### **Easy-grip utensils**

Spoons and forks with bigger handles or soft grips are easier to hold if hands shake or feel weak



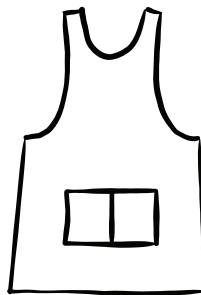
### **Two-handled cups**

Offer steadier control when drinking, which can help with tremor or reduced hand strength



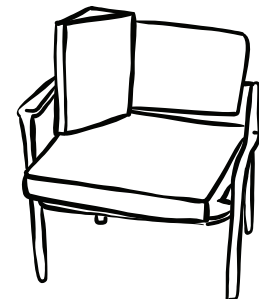
### **Protective clothing**

Aprons, adult bibs or collar-tucked napkins can make meals less stressful



### **Postural supports**

Cushions or wedge pillows help maintain upright posture, which improves swallowing



### **Care Partner Tip**

Try new tools together and focus on what makes meals easier and more enjoyable for both of you.

## Meal Preparation

The same symptoms that affect other daily activities can make meal preparation harder or unsafe. These may include movement changes, low blood pressure or fatigue. Thinking changes can also play a role.

If safety is a concern or preparing meals is challenging, talk with your care team for guidance. Some tasks may be doable with a different approach or a bit of support while others may be better to hand off. Work with an occupational therapist for strategies and tools to help. You may also try:

- Tools with larger, easier to grip handles
- Sitting while preparing ingredients or cooking to reduce fatigue
- Using pre cut ingredients or tools that reduce the need for chopping
- Non slip mats to keep items steady
- Breaking tasks into smaller, simpler steps
- Gathering all ingredients in one place before you start

### Caution

Cooking can involve risks like falls, cuts, burns or leaving the stove on. Being aware of these hazards can help you decide what feels safe and when support may help.

## Dining Out

Eating at restaurants can bring a few challenges. A few practical choices can make meals easier.

Consider the following:

- Look for restaurants with table service and make a reservation when possible.
- Consider access (close parking, no stairs, clear paths and accessible restrooms).
- Ask for a bowl instead of a flat plate and for sandwiches cut in half.
- A spoon may be easier to use than a fork.

### Easier Foods

- Sandwiches or wraps
- Short pasta shapes
- Mashed potatoes
- Thick soups or stews

### Harder Foods

- Spaghetti
- Peas or corn
- Leafy salads
- Foods that crumble

## Are you Having Trouble Swallowing?

Swallowing can change with Parkinson's and may become more difficult over time. This is sometimes called dysphagia, which means trouble swallowing.

Signs can include:

- Trouble swallowing pills or food
- Food feeling stuck in the throat
- Coughing during or after meals or drinks
- Drooling or a “gurgly” voice
- Unplanned weight loss
- Fever

If you notice these signs, ask your care team for a referral to a speech-language pathologist (SLP) for a swallowing evaluation. This may involve a barium swallow or fiberoptic evaluation. Afterward, the SLP may suggest strategies like:

- Positioning or seating supports to help you stay upright while eating
- Eating without distractions
- Taking small bites, eating slowly and chewing thoroughly
- Avoiding dry, crumbly foods like crackers or chips
- Trying thickened liquids or smoothies if recommended

**Swallowing problems can lead to aspiration, when food or liquid enters the lungs. This can happen without coughing (called silent aspiration) and may increase the risk of pneumonia, a serious lung infection that can be life-threatening.**

### Swallowing pills

If swallowing pills is difficult, talk to your care team. They may suggest:

- Taking pills with soft foods like applesauce or yogurt
- Crushing immediate release tablets or opening certain capsules (including Rytary) and mixing with soft food
- Explore pump medications or other delivery methods

Swallowing is especially important in the hospital, where routines and medications may change. Order your free Hospital Safety Guide at

[Parkinson.org/HospitalSafety](https://www.parkinson.org/HospitalSafety).

## Tips for Managing Weight Loss

Unplanned weight loss is common in Parkinson's. It can be linked to swallowing changes, medication side effects, low appetite, fatigue, loss of smell or difficulty preparing food. A registered dietitian can help with meal planning.

- Boost flavor — Herbs, spices or citrus can make food more appealing
- Cook with whole milk, cream or coconut milk
- Add butter, nut butters, healthy oils or avocado to meals
- Snack between meals
- Eat smaller, more frequent meals (especially helpful with nausea or bloating)
- Sprinkle flax, chia or hemp seeds into foods
- Choose protein-rich foods like eggs, yogurt, beans, tofu or chicken to support muscle health

**Check with your doctor before using high-calorie supplements or making major diet changes.**

If you take levodopa: Eating protein too close to a dose can lessen its effect for some people. Common timing guidelines suggest eating about 60 minutes before or 30–60 minutes after medication.

Example: noon dose → eat by 11 a.m. or after 12:30 p.m.

## Helpful Resources

- Learn more about swallowing [Parkinson.org/NonMovement](https://www.parkinson.org/NonMovement).
- Read the “Speech & Swallowing” fact sheet at [Parkinson.org/Library](https://www.parkinson.org/Library).
- Watch the CareMAP videos on mealtimes and swallowing for practical tools and tips designed for care partners at [Parkinson.org/CareMAP](https://www.parkinson.org/CareMAP).