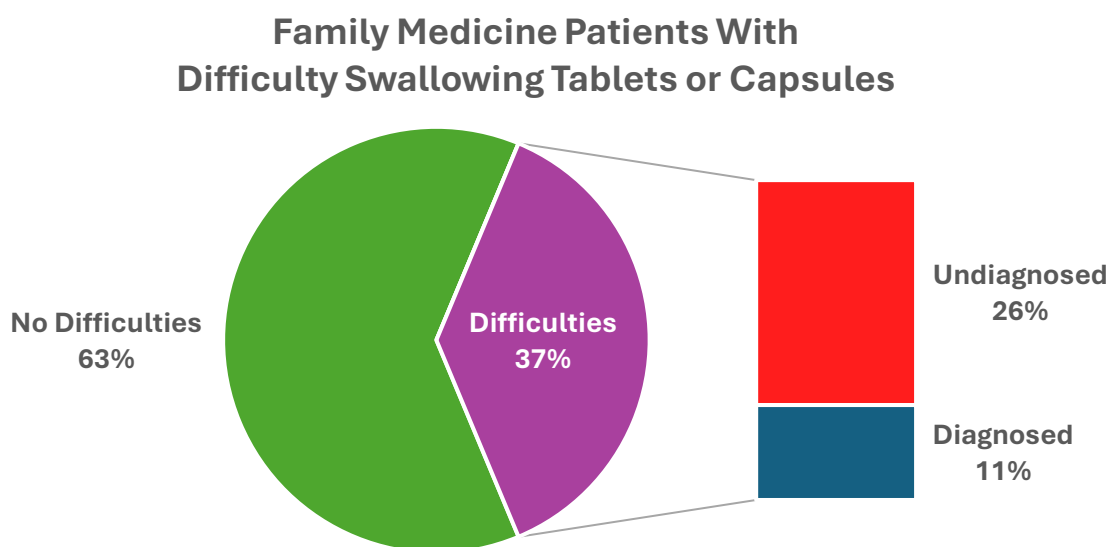


Today we're talking about a topic that might seem rather "dull" at first glance. But on second glance, hopefully quite relevant & interesting (especially for everyday family medicine!). Furthermore, something both new & old...

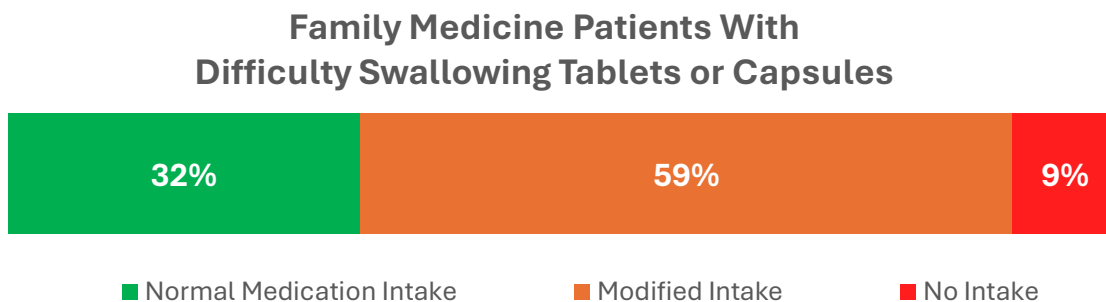
#1 How to Swallow Pills the "Right" Way?

According to a study of 1,051 general practice patients in Heidelberg, **37%** had difficulties swallowing medication—often without their GP knowing about it:



Source: Schiele JT et al, 2013

Failing to diagnose these swallowing difficulties has tangible consequences. Many patients independently modify or even discontinue their medication intake as a result:



Source: Schiele JT et al, 2013

Who is Affected and Why?

- Women, younger patients, and those with dysphagia (e.g., after a stroke) or mental health conditions are [more frequently](#) affected.
- Some researchers suggest a psychological [aversion to pills](#).
- Others emphasize physiological differences—having a small oral cavity or a high number of taste receptors can [triple](#) the risk.

What is the Ideal Swallowing Technique?

Despite the high prevalence of this issue, there are very few studies on it.

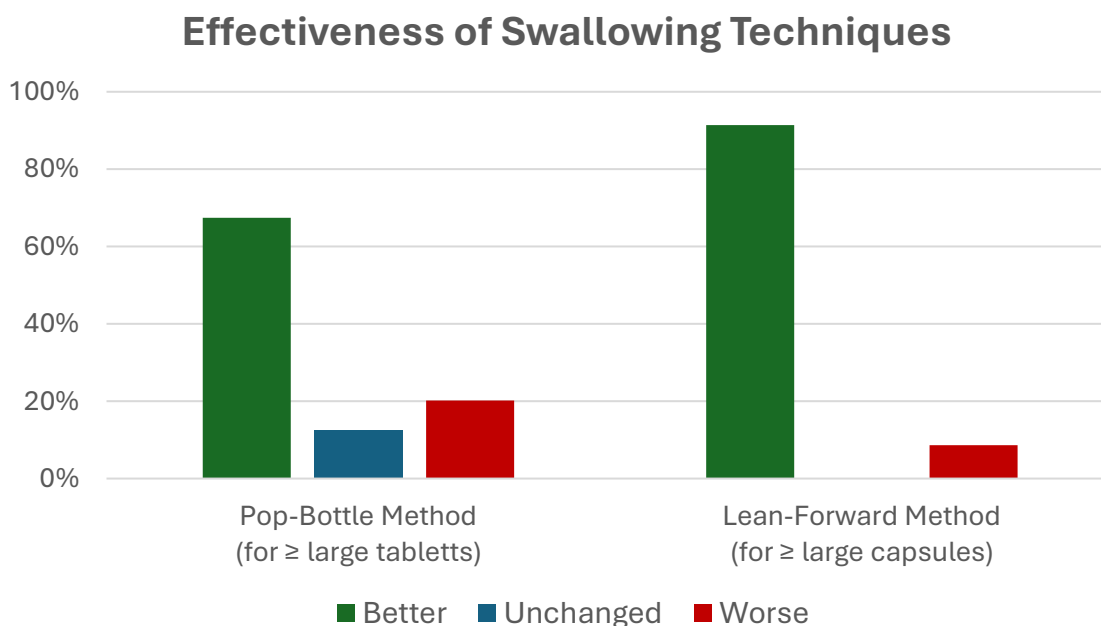
However, these two intervention studies are highly relevant for clinical practice:

Study 1: Two Swallowing Techniques

This [single-blind study](#) (2014) from Germany tested two swallowing techniques using 20 mL of water each. The first technique was tested 283 times, while the second was only tested 35 times:

- **Pop-bottle method for tablets** (place the bottle against the lips, suck in the water while tilting the head back).
- **Lean-forward method for capsules** (place water in the mouth without swallowing, tuck the chin to the chest, and then swallow the water).
- Both techniques explained in [images](#) and [16-second videos](#).

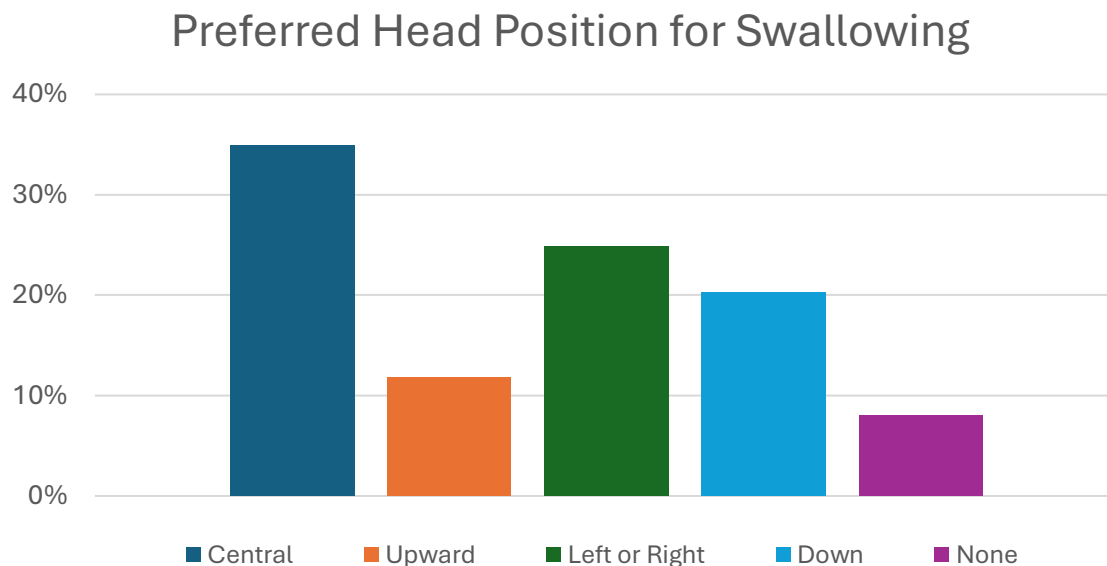
Study Results:



Source: Schiele JT et al, 2014

Studie 2: Five Head Positions

This [2010 study](#) from Canada had 381 participants try five different head positions while swallowing tablets. The participants were adults and children, most of them healthy and without swallowing difficulties. The study revealed that the preferred head position is highly individual:



Source: Kaplan BJ et al, 2010

What Else Should Be Considered?

- If **none** of these methods or head positions help, a [review](#) suggests considering other aids, medication changes or alternative administration routes, modification and mixing with food or drinks, or deprescribing.
- In patients with **dysphagia** (e.g., after a stroke), swallowing medication can lead to injury or aspiration. [One study](#) recommends the forward-leaning technique, while [another study](#) found that this prevents aspiration in only half of these patients.

Summary

- 37% of GP patients are affected.
- Most cases go undiagnosed, leading patients to modify or stop their medication on their own.
- Some have an aversion to pills, while others just have a small oral cavity.
- Two swallowing techniques and five head positions have been tested in studies, and other measures are available. However, it remains unclear which method works best for whom.
- Caution is especially advised in cases of dysphagia (e.g., after a stroke).

#2 New Journal: “The Lancet Primary Care”

Since early February, [The Lancet Primary Care](#) has been available - an open-access journal from the Lancet Group specifically focused on primary care. This is great news for family medicine research and a valuable new source for potential "Golden Nuggets"!

Why Is The Lancet Relevant?

According to the [JCR](#) (2024), The Lancet currently holds the (narrowly) highest Impact Factor among medical journals:

- The Lancet (98)
- New England Journal of Medicine (96)
- British Medical Journal (94)

Why Is the Impact Factor Relevant?

The Impact Factor (IF), calculated by [Clarivate](#), measures how often an average article in a journal is cited per year (based on the past two years). Also in general practice, this one figure often influences researchers' careers and institutional funding. However, it has notable weaknesses:

- Some fields cite more frequently than others, leading to a higher IF - but this does not necessarily mean they are "more important."
- Even studies in a "top journal" can be irrelevant, poor-quality, or manipulated. However, their authors still benefit from the high IF.
- The IF incentivizes researchers to cater to journal preferences and minimize risks rather than testing unconventional hypotheses that require taking scientific risks.

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