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**100% Effective Natural Hormone Treatment**  
**Menopause, Andropause And Other Hormone Imbalances**  
**Impair Healthy Healing In People Over The Age Of 30!**

## Dysphagia - A Swallowing Disorder

By Sharon Hopkins

Dysphagia is a swallowing disorder that causes difficulty in swallowing from the mouth to the

esophagus that leads towards the stomach. It is caused due to strictures and narrowing of the esophagus which makes swallowing difficult. It becomes a painful problem especially if you are trying to swallow meat or any other food product. You can feel the food stuck in the esophagus in the middle of the chest, which can be extremely discomforting. Dysphagia can get so severe that swallowing liquids can become troublesome. Eating becomes a chore with this condition.

Common signs and symptoms of Dysphagia are

- Difficulty in swallowing food – Bouts of coughing during or after meals – Recurring pneumonia attack
- Losing weight without any reason – Change in voice quality after mealtime

Dysphagia could deprive the body of proper nourishment eventually leading to weight loss and weakness. It is difficult for a dysphagia patient to remove food, stuck in the windpipe, by coughing or clearing throat. Therefore the food enters the lungs which can cause a serious infection resulting in Pneumonia. Swallowing problems can also be due to a growth of a pocket outside the esophagus, formed when the esophagus wall is weak. While you are sleeping or lying down the food trapped in the pocket gets inside the pharynx. In this condition esophagus is too narrow, thus the trapped food prevents other food items from entering the stomach.

Dysphagia can be caused due to damaged muscles and nerves used for swallowing. People suffering from Parkinson's disease may have problems while swallowing. A stroke or head injury may also affect the muscle that may constrain the mouth and throat movement. An infection or an irritation could narrow the esophagus. Some people have problem swallowing food right from birth for e.g. a hole in the roof of the mouth which leads to inability to suck.

Home Remedies for Dysphagia

Licorice (*Glycyrrhiza glabra*) helps in reducing spasms and swelling. It relieves pain that affects the gastrointestinal tract. Avoid taking it for longer periods if suffering from blood pressure. A dose of 380

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to 1,140 mg per day is recommended.

Slippery elm (*Ulmus fulva*) protects irritated tissues and promotes healing. A dose of 60 to 320 mg per day is advised. Mix 1 tsp. of slippery elm powder with water and have it three to four times a day.

You can also use these herbs Valerian (*Valeriana officinalis*), Wild yam (*Dioscorea villosa*), St. John's wort (*Hypericum perforatum*), Skullcap (*Scutellaria lateriflora*) and Linden flowers (*Tilia cordata*) in tincture or tea form. For the tea, use 1 tsp each of these herbs for 1 cup of water to be steeped for 10 minutes. Drink it three times a day. In tincture form use equal parts of these herbs 30 to 60 drops three times a day.

**Warning:** The reader of this article should exercise all precautionary measures while following instructions on the home remedies from this article. Avoid using any of these products if you are allergic to it. The responsibility lies with the reader and not with the site or the writer.

Sharon Hopkins has been managing number of natural home remedies websites, such as

<http://www.home-remedies-for-you.com>

, which provides information on different uses of the home

remedies and natural cures. Dysphagia can be treated by using simple and easy home remedies.

### **Is Dysthymic Disorder a Second-Rate Depression?**

**By Michael G. Rayel, MD**

#### **Is Dysthymic Disorder a Second-Rate Depression? by Michael G. Rayel, MD**

Dysthymic Disorder, used to be called Dysthymia, is a low-grade and yet chronic depression characterized by feelings of sadness or depression associated with lack of interest to do things and some physical symptoms such as lack of energy, sleep, and concentration.

Psychological symptoms such as feelings of hopelessness, helplessness, and worthlessness can also occur. In addition, some patients harbor thoughts of death and feelings of emptiness.

This is a type of clinical depression that is supposed to be "milder" than Major Depressive Disorder (MDD - used to be called Major Depression) because the symptoms don't necessarily happen everyday. Unlike patients who suffer from MDD, Dysthymic patients are not bed-bound, still able to work, and does not appear to be sick. But most of these individuals complain that they haven't felt "normal" or "happy" for a long time.

Moreover, Dysthymic Disorder is manifested by lack of drive and motivation. Hence, relatives and friends tend to misinterpret their mood and behavior. Some patients endure the stigma of being

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considered "lazy" or not "motivated enough" to do worthwhile goals.

As time passes by, patients with this disorder have difficulty functioning. But because they still appear normal, the illness is not recognized and patients don't get treated early. A lot of times, they are not referred to a psychiatrist.

So is Dysthymic Disorder a second-rate psychiatric disorder? Based on my experience, patients experience considerable emotional turmoil. In fact, some dysthymic patients eventually develop a more serious depression called Major Depressive Disorder. When "double depression" (dysthymic disorder and major depression occurring together) happens, patients are so depressed that they become a threat to themselves and become functionally impaired. At this time, psychiatric hospitalization becomes necessary.

So Dysthymic Disorder is a serious health problem that should be recognized and treated promptly. It is an illness that somehow hides its existence from everyone including clinicians and patients themselves.

What is the treatment? Dysthymic disorder can be treated by antidepressants and psychotherapy. Most patients respond to treatment although some still suffer despite adequate treatment. Also, there are some individuals who only respond minimally. As such, this illness can be more challenging to treat than others.

Dr. Michael G. Rayel - author (First Aid to Mental Illness-Finalist, Reader's Preference Choice Award

2002) psychiatrist, and inventor of Oikos Game: A Personal Development and Emotional Skills Game. For more information, please visit [www.oikosgame.com](http://www.oikosgame.com).

How To Overcome Snoring and Sleep Apnea



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