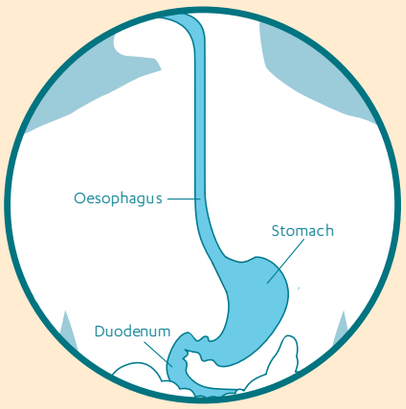
MercyAscot
ENDOSCOPY

Oesophageal Dilation

WHAT IS A OESOPHAGEAL DILATION?

Oesophageal Dilation is the procedure where a narrowing (stricture) of your oesophagus is stretched to improve your swallowing.



You will be given some sedation before the doctor passes the endoscope through your mouth and into the oesophagus. The endoscope is a long flexible tube (thinner than your little finger) with a bright light at the end. Through it, the doctor then places a guide wire across the narrowed area in the oesophagus. Using the wire as a guide, the stricture is dilated with a dilator or a balloon. X-ray equipment is sometimes used to help.

The dilation is often repeated using dilators or balloons to increase the size of the narrowed oesophagus until it has been stretched adequately.

During your procedure you will be given **sedation**. It is important that you arrange for someone to drive you home following your procedure. You are not permitted, by law, to drive yourself. For safety reasons, if you are travelling on public transport, or in a taxi, please arrange for a support person to travel with you.

PREPARATION

Some patients need to be admitted to hospital for a few days. You will be advised about this by your doctor. To allow a clear view the stomach must be empty. You will therefore be asked not to have anything to eat or drink for at least four hours before the procedure.

When you come to the Endoscopy unit, a doctor will explain the procedure to you and its implications. Please tell the nurse or doctor about any previous endoscopy examinations you may have had and if you have any allergies or bad reactions to drugs or other tests.

You may be asked to take off your shirt or jumper and to put on a hospital gown. It will be necessary for you to remove any false teeth or contact lenses. They will be kept safely until after the examination.

PROCEDURE

In the examination room, you will be made comfortable on a couch, resting on your side. A nurse will stay with you throughout the procedure.

X-ray equipment may be beside the couch in preparation and the staff may be wearing protective x-ray aprons. The amount of x-rays you receive will be strictly controlled for your safety. You will then be given a sedative injection into a vein to make you sleepy and relaxed.

To keep your mouth slightly open, a plastic mouthpiece will be put gently between your teeth. The procedure usually takes approximately 15 minutes. When the doctor passes the endoscope through your mouth and into your oesophagus it will not cause you any pain, nor will it interfere with your breathing at any time during the procedure.

Removal of the endoscope is quick and easy. You may feel the dilator as it passes down your throat and through the stricture, but it is not painful.

SEDATION

Sedation is generally used for this procedure. It is important that you **do not drive or operate machinery for 12 hours** after your procedure. Following this procedure you may be required to stay in hospital. In some cases you will be discharged after 4 hours, however this is on the advice of your specialist. Please prepare for an overnight stay.

After the Dilation

You will be left to rest for about 30 minutes after the procedure. It is quite likely that your throat will feel slightly sore. You will be left to rest for about 30 minutes after the procedure. It is quite likely that your throat will feel slightly sore, particularly in the area which has been dilated. Please tell the staff if you have any other pain or discomfort.

Nursing staff will measure your pulse, blood pressure and temperature from time to time to make sure all is well. You may be asked to stay for several hours after the procedure for appropriate observations.

You will be able to have a drink of water after a couple of hours. If there are no problems you will be able to have some food later in the day. If you are going home after the procedure, please ensure that someone is available to pick you up. it is important to rest quietly for the remainder of the day.

The effects of the procedure and the injections have usually worn off by the following day when you should be able to resume your normal activities and eat a soft diet. Your doctor should advise you about your subsequent diet and any medication. In general, it is wise to avoid chunks of food, to chew your meals well and to take them with plenty of fluid. Tablets can stick and aggravate swallowing problems. These should always be broken up or crushed and taken with plenty of water or in a spoonful of yoghurt.

RISKS

In many cases, the dilation will have to be repeated, either within a week or so to complete the initial stretch or later if the narrowing recurs. The risk of recurrence can be reduced by appropriate medical advice and treatment. It is important for you to discuss this with your specialist. In some cases a plastic tube is left inside the oesophagus to help with swallowing.

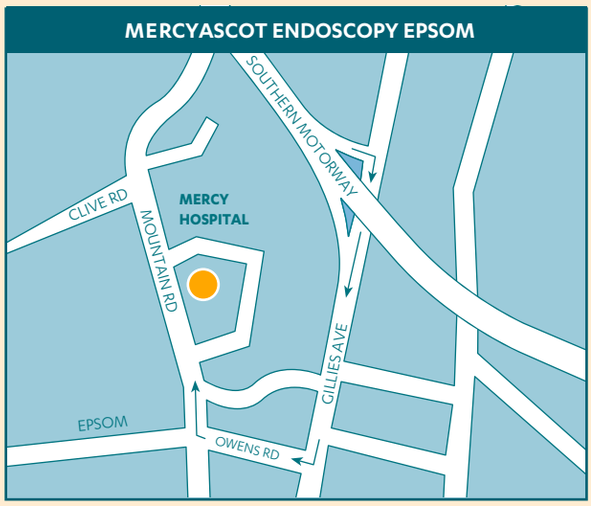
Very rarely (approx. 2-5%), the dilation can cause a perforation of the oesophagus with the stretching resulting in a split in the wall in or near the stricture. This complication is usually evident within a few hours when it occurs.

PLEASE READ THESE POINTS CAREFULLY:

- You must contact your doctor if you suffer severe or prolonged pain or vomiting, passing of blood or high temperature

If you have any questions or concerns please raise these with your doctor or nurse before the procedure

LOCATIONS



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