

Oesophageal dilatation or oesophageal stent

This leaflet explains more about having oesophageal dilatation and an oesophageal stent procedure including the benefits, risks and any alternatives. If you have any questions or concerns, please speak to a doctor or nurse caring for you in the interventional radiology department.

What is oesophageal dilatation?

The oesophagus, or gullet, is the tube that takes food down from the mouth to the stomach. If it becomes narrowed or blocked, there will be a problem with swallowing. Oesophageal dilatation is a procedure which widens a narrowing in your oesophagus using a special catheter (long, thin tube) with a balloon attached. Dilatation should expand the narrowing and make it easier for you to swallow.

What is an oesophageal stent?

Sometimes dilatation will not solve the problem and the radiologist (a doctor who uses imaging machines to diagnose and treat illnesses) will place a stent in the narrowing. An oesophageal stent is a fabric covered metal mesh tube inserted down the oesophagus and across the blockage. It is passed by mouth into the oesophagus and positioned across the area that has narrowed. It gently expands to allow fluid and foods to pass down to the stomach more easily.

What are the benefits of oesophageal dilatation and stent?

It should expand the narrowing and make it easier for you to swallow.

Are there any risks?

Serious risks and complications of having an oesophageal dilatation or stent are very rare. However, as with any procedure, some risks or complications may occur. The radiologist will explain these to you.

- There is a small risk of a perforation (tear) of your oesophagus. This is greater if you are currently having high dose chemotherapy or radiotherapy. This is a serious complication and may require an operation or another stent inserting.
- Infection or minor bleeding can occur during the procedure. Infections can be treated with antibiotics and bleeding with a blood transfusion.
- Some people get heartburn and acid reflux after the procedure. This can be controlled with simple medicine if necessary.
- Rarely, the stent may slip out of position and the procedure may need repeating.
- Occasionally it may not be possible to fit or place a stent for technical reasons. If this is the case, your doctor will discuss this with you.

Are there any alternatives?

Sometimes surgery will be recommended, but this is usually if the narrowing in your oesophagus is caused by cancer. Your doctor has recommended an oesophageal dilatation/stent as the best option for you but if you would like more information on surgery, please speak to your doctor.

What do I need to do to prepare for the procedure?

You will need to have a blood test about one week before the procedure. Your doctor or clinical nurse specialist will tell you about this and how to arrange it when they recommend an oesophageal dilatation/stent.

If you are having an **oesophageal dilatation** you will need to come into hospital to have the procedure and you can go home the same day. You will need to arrange for a responsible adult to take you home in private transport, and to stay with you overnight. We do not recommend that you use public transport as it is unsafe if you feel unwell.

If you are having an **oesophageal stent** you will need to stay in the hospital. Your nurse on the ward will help you to prepare for the procedure. You should be given a copy of our leaflet, **Preparing for your stay at Guy's** or **Preparing for your stay at St Thomas'**, depending on the hospital where you will be treated. This leaflet gives you more information about the hospital, how to get here and what to bring with you. Please ask us for a copy if you do not have one.

To prepare for either procedure you will need to make sure you do the following:

- Please let us know if you are taking any **antiplatelet medicines** (for example, aspirin, clopidogrel) or any **medicines that thin the blood** (for example, warfarin, rivaroxaban), as you may need to stop them temporarily before the procedure. Call the interventional radiology department for advice as soon as you get your appointment letter on **020 7188 5576** (for Guy's Hospital) or **020 7188 5479** (for St Thomas' Hospital).
- If you are taking **medicines for diabetes** (for example, metformin) or using insulin, then these may need to be altered around the time of the procedure. Call the interventional radiology department on the numbers above for advice as soon as you get your appointment letter.
- Please let us know if you are taking any regular medicines (including anything you buy yourself over the counter or any herbal or homeopathic medicines) and if you have any allergies to any medicines.

Fasting instructions

Please do not eat or drink anything (except non-fizzy water) for six hours before your procedure. This means that you cannot suck on sweets or chew gum. You are allowed to drink water up to two hours before your appointment.

Giving my consent (permission)

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves. If you would like more information about our consent process, please speak to a member of staff caring for you.

What happens before the procedure?

You will be given the opportunity to ask the radiologist any questions you have and you will need to sign the consent form before the procedure can take place. You will be given a hospital gown

to wear. A small plastic tube (cannula) will be put into your arm so we can give you medicine during the procedure.

Before the procedure starts we may give you a small amount of liquid to drink. This is water containing a soluble contrast (dye). The dye shows up on an imaging monitor and allows the radiologist to clearly see the narrowing in your oesophagus.

What happens during the procedure?

You will be taken into the interventional radiology theatre and sit or lie on the table. The back of your throat will be sprayed with a local anaesthetic. This numbs the area so you should not feel any pain. Most patients also have “conscious sedation”. This involves us giving you two medications through your cannula to relax you and ease your pain. This often causes you to forget most of the procedure afterwards however you are awake enough during the procedure to breathe for yourself and communicate with the staff.

Monitoring equipment will be attached to you, so we can measure your blood pressure, pulse and oxygen throughout the procedure. A fine catheter (long, thin tube) is passed through your mouth and down your oesophagus until it has crossed the narrowing. This is then exchanged for a balloon catheter (with a balloon attached).

The radiologist uses imaging machines to follow the progress of the catheter and see when the balloon is in the correct position. When it is, the balloon will be expanded, which widens the narrowing. This is done a number of times, using different sized balloons, until the narrowing has disappeared.

If you are having a stent, the radiologist will then place a metallic stent across the opening. This is done by passing the stent through a catheter tube.

Will I feel any pain?

The procedure may be slightly uncomfortable, but the local anaesthetic and sedation should prevent you from feeling any pain. There will be a nurse standing next to you and looking after you. If it becomes too painful please let your nurse know, so more pain relief can be given through the tube in your arm.

If you have a stent inserted you will experience some discomfort afterwards. This is because the stent can move and expands and embeds into the narrowed area of your oesophagus. The pain will usually last from between four to 48 hours and can be controlled with your usual painkiller.

What happens after the procedure?

You will be taken to the recovery room where you will need to rest until the sedation wears off. If you are staying in the hospital, you will be taken back to your ward. Your blood pressure and pulse will be checked at regular intervals and a clip on your finger will measure the oxygen level in your blood.

About four hours after the procedure, you will be given some imaging dye to swallow once again. Images will then be taken of your oesophagus. This is to make sure that the procedure has worked. Once this test has been performed you should be able to eat and drink again.

When you do start to eat, it is important to follow the advice given to you by nurses or doctors. If you experience any pain, please tell your nurse.

If you are an out-patient you will be allowed to go home. If you have had a stent inserted, you will need to stay in the hospital for a few days. If not, you can go home about six hours after the procedure if you feel able to do so.

You will need a responsible adult to take you home by private transport. We do not recommend using public transport as it is unsafe if you feel unwell. Please arrange to have somebody stay with you overnight.

Contact us

If you have any questions or concerns about having an oesophageal dilatation or oesophageal stent, please contact the interventional radiology department at Guy's Hospital on **0207 188 5576** or St Thomas' Hospital on **020 7188 5479** (Monday to Friday, 9am to 5pm).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch:

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111

NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk

Get involved and have your say: become a member of the Trust

Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:

t: 0800 731 0319 **e:** members@gstt.nhs.uk **w:** www.guysandstthomas.nhs.uk/membership

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