

Endoscopy Department

Having an oesophageal stent inserted

Important Information

Before your appointment

- All medications should be taken as normal with a little water.
- If you are taking **Warfarin** please read the '**Alert for patients on Warfarin**' carefully as you may need to have an INR test 7 days before.
- People with **diabetes** should have additional instructions. Contact the Endoscopy department on 01223 216546 immediately if missing.
- If you have any queries about the procedure or find that you cannot keep this appointment please contact the Endoscopy Office between 0900 and 1700 on 01223 216546

On the day

- Have **nothing to eat for eight hours or drink for three hours** before your appointment

At the hospital

- If you have heart valve disease or require antibiotics when you visit the dentist please tell us when you come for the procedure.
- Please come to the Endoscopy Department, which is on Level 3 of the Addenbrooke's Treatment Centre (ATC).
- Use **Car park F**, situated opposite the main entrance to the centre, take the 'visitor' parking ticket issued at the car park entrance to the reception desk in the Treatment Centre to have it changed to the concession for outpatients' version. Bring your appointment letter with you.
- Please note that the appointment time is for your pre procedure check, not the time of your examination. You may be here for up to 2 hours.

Your doctor has requested this procedure to help you with eating and drinking.

What is an oesophageal stent?

A stent is a flexible tube that is placed into your oesophagus (gullet) to keep it open to help you eat. It is put into place using a gastroscope, this is a long flexible tube (thinner than your little finger) with a light at the end.

If your oesophagus has a narrowing called a stricture it may need to be stretched. This is done using a balloon called a dilator immediately before the stent is put into position. X-ray screening is used to help us do this safely.

The procedure can take between 10 to 45 minutes.

Sometimes it is helpful to take a biopsy – a sample of the lining of the gut. This is done by passing a small instrument called forceps through the gastroscopy to 'pinch' out a tiny bit of the lining (about the size of a pinhead) which is sent to the laboratory for analysis.

Getting ready for the procedure

Wear loose fitting washable clothing and leave valuables at home.

On arrival, the procedure will be explained and you will be asked to sign a consent form. We want to make sure that you understand the procedures and their implications. Remember, you can change your mind about having the procedure at any time.

An intravenous injection is given into a vein to make you feel relaxed and sleepy but not unconscious. This means you may not be aware of the procedure. The injection will continue to have a mild sedative effect for up to 24 hours and may leave you unsteady on your feet for a while.

If you are an outpatient (not staying in hospital), you **must** arrange for a responsible adult to come with you, wait with you and then take you home. Altogether, you and your escort may be in the department for up to three hours. If you come without someone, the procedure will be cancelled. If you are using hospital transport, an escort is not required.

During the procedure

For your comfort and reassurance, a trained nurse will stay with you throughout. In the procedure room, you will be asked to remove false teeth, glasses and made comfortable on a couch lying on your left side.

The endoscopist will give you the injection. To keep your mouth open so that you do not bite the gastroscopy, a plastic mouth guard will be put gently between your teeth. A plastic 'peg' will be placed on your finger to monitor your pulse and oxygen levels.

When the endoscopist gently passes the gastroscopy through your mouth you may gag slightly, this is quite normal and will not interfere with your breathing. You may feel the dilator and stent as they are passed through the stricture; most people find this not too uncomfortable.

During the procedure, some air will be put in to your stomach so that the endoscopist will have a clear view, this may make you burp and belch a little. Some people also find this a

little uncomfortable. The air is removed at the end. When the procedure is finished, the gastroscope is removed quickly and easily.

Minimal restraint may be appropriate during the procedure. However if you make it clear that you are too uncomfortable the procedure will be stopped.

Potential problems

Very rarely this procedure may cause bleeding or split the wall of the oesophagus, this is called a perforation. These complications will become evident within a few hours. In most cases, a split will heal itself but occasionally another stent may be needed.

It is possible that the stent may become blocked, this would require another endoscopic procedure to clear it.

There may be a slight risk to teeth, crowns or dental bridgework; you should tell the nurses if you have any of these.

Other rare complications include aspiration pneumonia (inflammation of the lungs caused by inhaling or choking on vomit) and an adverse reaction to the intravenous sedative drugs.

After the procedure:

It is quite likely that your throat and oesophagus will feel slightly sore particularly in the area that has been stented. Please tell the staff if it becomes too uncomfortable.

You may need to have a chest x-ray about an hour after the procedure.

You are advised not to have anything to eat or drink until the x-ray has been checked. You will be given an information sheet with advice about eating and drinking and how to look after your stent.

You will normally be admitted at least overnight after a stent insertion. If however you go home on the same day you are advised not to drive, operate machinery, return to work, drink alcohol or sign any legally binding documents for the next 24 hours. You are also advised to have a responsible adult stay with you for the next 12 hours.

If you have any of the following you should contact your GP, the Endoscopy department or the Accident and Emergency department.

- severe pain,
- black tarry stools
- persistent bleeding

When do I know the result?

The endoscopist will be able to tell you the results immediately after the procedure. It is a good idea to have someone with you when you talk to the endoscopist because the

sedation can make you forget what has been discussed. If a sample has been taken the results will not be available for a couple of weeks.

Details of the results and any necessary treatment should be discussed with the doctor who recommended you to have the procedure.

Training doctors and other health professionals is essential to the continuation of the National Health Service, and improving the quality of care. Your treatment may provide an important opportunity for such training under the careful supervision of a senior doctor. You can, however, decline to be involved in the formal training of medical and other students: this won't affect your care and treatment.

Alternatives:

As a therapeutic intervention, there are no real alternatives to a stent insertion. In some cases, depending on individual factors such as the symptoms present and the condition being treated, laser therapy may be indicated.

For more information:

- Contact the Endoscopy Office between 0900 and 1700 on 01223 216546
- See www.addenbrookes.org.uk/consent

Please ask if you require this information in other languages, large print or audio format: 01223 216032 or patient.information@addenbrookes.nhs.uk

Potete chiedere di ottenere queste informazioni in altre lingue, in stampato grande o in audiocassetta.

Italian

若你需要本信息的繁體中文、大字體或音訊格式的版本，請要求索取。

Cantonese

तमने आ माहिती चीछ भाषाओमां, मोटा अक्षरोमां अथवा सांभणी शकाय जेवा माध्यम (ओडीओ इमेज)मां जेठती छीय तो कृपा करीने पूछो.

Gujarati

تکایہ پرسیار بکے نہ گھر نہ وزانیاریہت دہوی بہ زمانیکی تر ، بہ بیٹی گہورہ یانیش بہ شیوہی دہنگ

Kurdish

آگر آپ کو یہ معلومات دوسری زبانوں میں، بڑے الفاظ کی اشاعت میں یا آڈیو ٹیپ پر درکار ہوں تو ہمارے مہربانی اس کیلئے درخواست کریں۔

Urdu



Addenbrooke's is smoke-free. Please do not smoke anywhere on the site.
For advice on quitting, contact your GP or the NHS smoking helpline free, 0800
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Document history

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