

Oesophagoscopy

An examination of the food pipe



Liverpool Heart and Chest Hospital NHS Trust
Thomas Drive
Liverpool
Merseyside
L14 3PE
Telephone: 0151-228 1616
www.lhch.nhs.uk

This leaflet has been written to provide information about a procedure that allows a doctor to examine the food pipe (Oesophagus). We hope it answers some of the questions or concerns you may have. It is not intended to replace talking with medical or nursing staff.

What is an Oesophagoscopy?

An Oesophagoscopy is a procedure that allows a doctor to examine your food pipe (Oesophagus) by passing a thin tube with a camera on the end of it down your throat.

Why do I need this test?

This test will allow your doctor to examine your Oesophagus and look for signs of disease or abnormalities. Your doctor may take a sample of tissue during the procedure for further examination. Occasionally your doctor may want to carry out treatment such as stretching (dilation) of the oesophagus during the procedure.

How is it done?

You will be given a general anaesthetic therefore you will be asleep during the procedure. Once you are asleep your doctor will insert a long thin tube with a camera on the end of it (scope) into your mouth and down your throat. The doctor will be able to guide the scope by looking into the eye piece or looking at the images on a video monitor. Looking down the scope will allow your doctor to view your oesophagus. Samples of tissue may be taken during the procedure and later examined.

Will I feel any pain or discomfort after the procedure?

You may have a slightly sore throat after the procedure. If you are in any pain you should inform staff.

How long does it take?

The procedure takes approximately 30 minutes although this varies.

How do I prepare for the procedure?

You will usually come into hospital the day before or occasionally on the morning of the procedure. You may need to have a heart tracing (ECG), breathing test and chest x-ray and routine blood tests. Staff on the ward will inform you when to stop eating and drinking prior to the procedure.

What are the benefits of having the procedure?

The procedure can help your doctor to locate and diagnose or rule out diseases or conditions that affect the Oesophagus.

What are the risks involved?

As with any procedure there is a small risk of complications.

There is a small risk of developing a chest infection or pneumonia.

There is a small risk of causing a tear to the oesophagus, which could lead to bleeding or a serious infection.

Injury to the voice box caused by the instruments may lead to voice changes.

Any risk involved with the procedure will be discussed in more detail before you sign a consent form.

What alternatives do I have?

You may choose not to have the procedure.

Your doctor would be happy to discuss any alternative tests or examinations if they are applicable to you.

What can I expect after the procedure?

After the procedure you may be taken to a recovery room in theatre and closely monitored until you are awake. You will then return to the ward. You may notice that you cough up a small amount of blood. This is entirely normal and usually clears within 24 hours. You may also have a sore throat or a cough for a short while. Staff on the ward will inform you when you are able to eat and drink.

When can I resume normal activities?

You may be able to go home the same evening or sometimes the next day. You should not drive for 24 hours following the procedure. You should arrange to take up to 1 week off work. You will be reviewed as an outpatient and informed of the results of the examination.

This advice will be discussed in more detail before you go home and you will be given a discharge advice sheet.

For further information visit:

www.lhch.nhs.uk
www.nhsdirect.nhs.uk
www.lunguk.org
www.dipex.org

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