

## **OESOPHAGEAL DILATATION**

### **What is oesophageal dilatation?**

When a section of the oesophagus becomes narrowed, it may lead to difficulty with swallowing food and food may even become stuck. The narrowing is often the result of long-standing acid reflux but can also be due to other conditions such as oesophageal rings or webs which are benign conditions. It may become necessary to stretch the oesophagus to increase its size. This may have to be performed more than once to have a permanent effect.

### **How are you prepared?**

No special preparation is necessary other than **fasting prior to your procedure**. An empty stomach allows for the best and safest examination, so you should have nothing to eat or drink, including water, for **6 hours** before the examination. Once you are comfortably sedated, a gastroscopy or upper endoscopy is performed to examine the lining of the upper part of your gastrointestinal tract, which includes the oesophagus, stomach and duodenum. A thin, flexible tube, which has its own lens and light source, is inserted through the mouth and the dilatation is performed using special dilating balloons. The procedure will take 10-20 minutes. If you are taking **Aspirin, NSAIDs, Persantin, Warfarin, Iscover, Plavix, Pradaxa, or Xarelto**, you must notify your doctor.

### **What are the possible risks and complications?**

Oesophageal dilatation is usually safe when performed by doctors who have been trained and are experienced in these procedures. Complications depend upon the severity of narrowing and whether there are associated conditions such as previous radiotherapy or oesophageal cancer present. The major risk is oesophageal perforation, or tear, and could require surgery. If a perforation occurs it is usually recognised immediately and can sometimes be treated with placement of a stent (plastic covered tube) and antibiotics. Bleeding might occur but it's usually minor. Bleeding can stop on its own or be controlled through the endoscope. Some patients might have a reaction to the sedatives or complications from heart or lung disease.

### **Afterwards**

The sedative pain killer you will be given before the procedure is very effective in reducing discomfort. It may also affect your memory for some hours afterwards. For this reason, you will need to make arrangement to be driven home by a family member or friend and need to ensure that someone stays with you after your discharge. You should have only clear fluids for the rest of the day.

Although complications are uncommon, it's important to recognise early signs of possible complications. Contact Dr Alexander during working hours on 5229 4480 if you notice severe abdominal or chest pain, fever and chills, or vomiting blood or attend Emergency department if after hours.