

Upper Aero Digestive Tract Endoscopy

You have been asked by your Consultant to undergo an Endoscopy as part of your assessment process.

What is an Endoscopy?

An Endoscopy is a surgical procedure carried out under general anaesthetic to examine the Upper Aero Digestive Tract, i.e. upper food passage, voice box and the back of your nose and throat.

The procedure is done to assess your symptoms and may also be performed in order to decide on the best treatment option for you.

It may be necessary to remove tissue for analysis and diagnosis during the procedure.

The medical team may use the following terminology when describing the Endoscopy procedure:

- **Pharyngoscopy** – looking and examining inside the pharynx (back of the nose and throat)
- **Laryngoscopy** – looking and examining the larynx (voice box)
- **Oesophagoscopy** – looking and examining the upper oesophagus / gullet (food pipe).

The benefit of having an Endoscopy under general anaesthetic is that it allows your doctor to examine and diagnose your problem thoroughly.

The Endoscopy may be done as a day case, although an overnight stay may be necessary, this will be decided by the medical staff looking after you.

What are the risks of having an Endoscopy?

As with all medical procedures there are risks involved with an Endoscopy.

The doctor who has requested the test will have considered these risks and compared them to the benefit of having the procedure carried out.

The risks associated with an Endoscopy are as follows:

- **Injury to teeth, lip, gum or tongue** - if you have dental caps they can sometimes become dislodged or loosened – mention it to the anaesthetist and surgeon on assessment
- **Temporary numb tongue**
- **Sore throat** – this usually settles after a few days.
- **Bleeding** – this will be only if you have had a biopsy, it will be observed closely following the procedure
- **Voice change** – if a biopsy has been taken from you voice box your voice will be worse initially after surgery.

This may be a permanent change in your voice. You should rest your voice (no speaking) for 48-72 hours after surgery.

The following risks are more serious but happen very rarely:

- **Perforation** – a tear in the food passage; you will be observed

closely after the procedure for signs of this.

A perforation may require further surgery to correct it and would then have the risk of neck scar, nasal feeding tube, antibiotics and a prolonged hospital stay.

- **Airway obstruction** – if you have any previous breathing difficulties there is a risk you may have a reduced airway.

What are the risks of having a general anaesthetic?

A general anaesthetic can cause side effects and complications. Side effects are common but are usually short lived, they can include:

- Nausea
- Confusion
- Pain

Complications are very rare, but can cause lasting injury; they include awareness, paralysis and death.

The risks of anaesthetic and surgery are lower for those undergoing minor surgery, if you have any concerns please discuss them with the Anaesthetist before your surgery.

What should I expect after my Endoscopy?

You will be nursed on a ward after the procedure. The nurse will check your pulse, temperature, blood pressure and breathing regularly.

You will be advised when you can start taking sips of water. Anaesthetics can make some people feel sick and we would advise you not to drink until this feeling has passed.

Inform the nursing staff if you feel sick and they can give you medication to help ease your symptoms.

If you feel dizzy, please do not try to get up and move around the ward by yourself,

inform a member of staff who will assist you.

Driving

You should **not** drive for 24hours after a general anaesthetic.

Discharged to your home

You will usually be allowed home a few hours after the procedure. This will depend on how you are feeling and your home circumstances.

If you go home on the day of your operation you will need a responsible adult to stay with you overnight and you must have access to a working telephone, just in case you are unwell after the procedure.

You will be given advice on any voice rest by the nurse who discharges you.

You are normally advised to rest your voice for 48-72hours; if you **have** to talk then it is best to use your normal voice and do not force your voice, whisper or try to talk loudly.

The nursing staff will advise you about painkillers before you are discharged, if you have any painkillers at home please inform the nurse.

Getting back to normal

It is normal to feel a little bit more tired than usual for a few days following the anaesthetic.

It is important that you eat and drink as usual, if you experience any problems eating or drinking you could try food that is softer in consistency and take plenty of fluids.

If the problem continues please contact the ward for advice.

If you experience any pains in your chest or back in the next 24hours you

must telephone the ward immediately or go to your local Accident & Emergency Department.

If you work, it may be best to take a few days off until you feel fully recovered and able to return to work.

You can self-certify for the first seven days, after this you will need a medical certificate that can be obtained from your GP.

An appointment to be seen in clinic may be arranged for you to be seen by the Consultant where you will be given the results/plans for your treatment.

If you do not receive an appointment please contact the relevant Ward on the numbers shown below.

Who should I contact if I have any questions?

If you have any questions or concerns, you can contact the medical team on the numbers below for help and advice.

Ward 28 0151 529 5238

Ward clerk Ward 28 0151 529 5245

The **Head and Neck information support service** is a telephone helpline run by the Clinical Nurse Specialists at Aintree.

Monday – Friday: 8am - 4pm

0151 529 5256 (Direct line/answer phone)



If you require a special edition of this leaflet

This leaflet is available in large print, Braille, on audio tape or disk and in other languages on request. Please contact:

Tel No: 0151 529 2906

Email: interpretationandtranslation@aintree.nhs.uk