ESOPHAGOSCOPY

WHAT IS AN ESOPHAGOSCOPY?

An esophagoscopy is looking directly down the esophagus with a special instrument (an esophagoscope). Esophagoscopy is a very important procedure used to find out what is actually wrong when a person has a problem with the esophagus. The esophagus is about 11 inches long. Most often the esophagus is examined along with the stomach and duodenum.

HOW CAN ESOPHAGOSCOPY HELP?

The following are some of the ways esophagoscopy can be helpful:
- Determine the cause of difficult or painful swallowing.
- Determine whether narrowing of the esophagus is from scar tissue or from some problem with its muscles.
- Determine the cause of inflammation that may be present as heartburn.
- Look for the cause of bleeding.
- Remove an accidentally swallowed foreign body that is stuck in the esophagus.
- Investigate a possible tear in the esophagus.
- Help verify the diagnosis of hiatal hernia.

PREPARATION FOR AN ESOPHAGOSCOPY

- A detailed history and a thorough physical examination will be done.
- For most examinations, there should be no drinking or eating for 8 hours before the procedure. If there is serious narrowing and fluid cannot get by easily or may still be there, you should not drink or eat anything for a longer period.
- Before the esophagoscopy, an x-ray of the esophagus with barium in it will be taken for a general look.

INSTRUMENTS

There are two types of esophagoscope.
- **Flexible esophagoscope**: This is an optical instrument with a light at its tip that is smooth, flexible, and about as big around as the tip of your little finger.
  Its advantages are as follows:
  - It is flexible so that it can bend around curves more easily.
  - It is thinner and easier to use.
  Its disadvantages are the following:
  - It does not stretch a narrowed esophagus quite as well as a rigid esophagoscope.
- **Rigid esophagoscope**: This is a rigid tube about as thick around as your index finger with a light at its tip.
  Its advantages are as follows:
  - Things can be seen more directly.
  - Narrowed areas can be stretched more easily and safely.
  Its disadvantages are the following:
  - It cannot go around curves.
  - It requires greater skill to use.
  - It potentially has a greater risk of injury.

The doctor doing your esophagoscopy will know which type of instrument to use and how to use it.

THE ESOPHAGOSCOPY

- Some fluids will be started in your vein.
- You will be given some medicine that will make you drowsy before you are brought into the endoscopy room.
- Your mouth and throat will be sprayed with an anesthetic to make them numb.
- You will be given some medicine through the vein to keep you drowsy during the procedure.
- The esophagoscope will be placed gently into your mouth and down your esophagus. It will examine everything carefully as it travels down and back up your esophagus. If anything suspicious is seen, a small piece of it (a biopsy) can be taken for examination in the laboratory.
- Unless there is a specific reason not to do so, the esophagoscope customarily is advanced into the stomach and (if a flexible esophagoscope is used) just past it into the duodenum so that they too can be examined for any unsuspected problem.
- When the examination is complete, the esophagoscope is removed.
- The medicine that kept you drowsy will be stopped, and you should become alert again quickly.
- The entire procedure takes about 30 minutes. Most patients remember very little of it.
- When your blood pressure, pulse, and breathing are stable and you are completely alert, you should be able to go home with a responsible adult.
- As with any operation, complications are always possible, some of them serious. With this type of operation, they can include injury or even perforation of the esophagus.

HOME CARE

- Be certain that all the numbness in your mouth is gone (usually in 1–2 hours) before you start eating. Otherwise, food or fluid may go down the wrong way into your trachea.
- Resume your usual activities.

CALL OUR OFFICE IF

- You continue to have severe pain with swallowing.
- You have pain in your chest or abdomen.
- You develop a temperature higher than 100°F.
- You have any questions.