



You and your oesophageal stent

Information for patients from the Trust's Endoscopy Units

The reasons for your stent placement will have already been discussed with you by your consultant or specialist nurse. This leaflet will help remind you of the information they have given you already. However, if you have any other questions or anything which is causing you anxiety, please speak to any of the unit staff who will be more than happy to help.

What is an oesophageal stent?

An oesophageal stent is a flexible, metal tube, knitted from a special type of metal thread (see diagram below).

How is the procedure carried out?

The stent is placed in the narrowed area of your oesophagus (gullet) which will help with your swallowing difficulties. The stent is placed into your oesophagus by a procedure called an endoscopy.

The endoscope, which is a long narrow camera, will be passed through your mouth down into your oesophagus. With the help of x-rays the endoscopist will have a clear view of the narrowed area.

To start with, it may be necessary to dilate or stretch the narrowing with a special balloon. The stent is then placed into the narrowed area where it will gradually expand and hold itself in position.

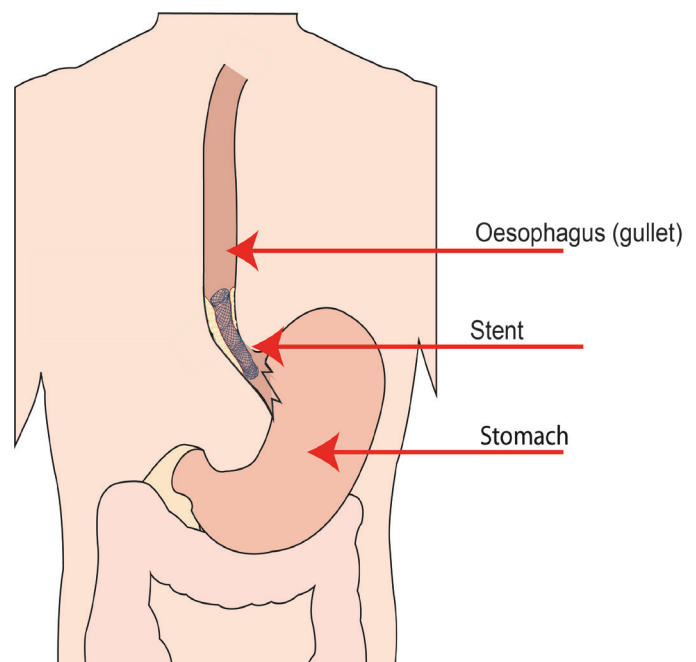


Diagram showing a stent in the oesophagus



How will the stent help me?

In position, the stent will gently expand to hold the narrowed area open. This will make it easier for you to swallow.

What happens when I arrive at hospital?

Please report to the Endoscopy Unit reception desk. One of the nurses will then collect you and take you to an admission area to prepare you for your procedure.

Will the procedure hurt?

You will be given sedation and a pain relief injection through a cannula in your hand or arm to make you relaxed and drowsy. A nurse will be with you the whole time.

How long will I have to stay in hospital?

Be prepared to be in hospital for a minimum of one to two days. Staff will make sure any pain from the procedure will be controlled, any follow-up tests can be arranged, and the staff can make sure you know how to look after your stent.

What happens after the procedure?

On the day of your procedure

- After the stent has been placed you will feel sleepy and will be allowed to rest. A nurse will be checking your pulse and blood pressure regularly.
- You may feel some pain and discomfort in your chest. If necessary, you will be given injections to relieve your pain and to keep you comfortable.
- You may have an intravenous (IV) drip to give you fluid.
- You may have a chest x-ray to check the position of the stent.
- You will not have any food, but your endoscopist may allow you to sip water later in the day.

Day two

- You may be ready to have a very soft diet today if you are managing to drink fluids. This may include soup, yoghurt, ice cream, runny custard, or jelly.

Day three

- You may be ready for a soft diet. This may include scrambled egg, steamed fish, omelette, mashed potatoes, mashed bananas, and custard. If you are managing to swallow, you may progress to more solid food. This may include sandwiches with no crusts, soft vegetables, pasta, and rice pudding.

Are there any risk to having the procedure?

The risks will be explained to you by the doctor performing your procedure. These may include bleeding, perforation of the oesophagus, misplacement of the stent, or failure to place the stent.

You will have time to discuss these in full with the nurses and doctors looking after you before your procedure goes ahead.

Will I need a follow-up appointment?

Your follow-up care will be discussed with you before you leave hospital. You will already have met the upper gastro-intestinal cancer nurse specialist. You will be seen by a dietician and your care will continue under the consultant who arranged your stent placement.

Will I need to change my eating habits?

Your stent will allow food to pass into your stomach through the narrowed gullet but this may not be as wide as a healthy gullet. You may have to look at changing your eating habits.

- Sit upright when you eat.
- Never rush your food, take your time.
- Always chew your food well. Wear your dentures if you have them. You will have to avoid some foods which can be difficult to chew into small pieces, for example chunky meat such as steak, tough or stringy vegetables, and soft cheese. These foods have a higher risk of blocking your stent.
- Do not swallow chunks of food, they may get stuck and block your stent.
- Drink plenty of water with your food and always have a fizzy drink after each meal; this will help keep your stent clean and prevent blockages.
- Try not to eat before going to bed and prop yourself up in bed with two or three pillows.

It is wise to remember that not only can food now pass into your stomach it can also come back up into your oesophagus, as well as stomach acid and cause heartburn. If this is troublesome your endoscopist can prescribe medication which will help.

What if my stent becomes blocked?

Should your stent become blocked and you experience difficulty swallowing, **do not panic**. Get up and walk around. Try sipping a fizzy drink, this may help dislodge small blockages. If the problem does not resolve, you cannot keep fluids down, or if you are regurgitating your food or vomiting contact your nearest Accident and Emergency (A&E) Department immediately.

Contact details

Please phone the Endoscopy Unit. The units are open Monday to Sunday 8am to 6pm:

- William Harvey Hospital, Ashford Telephone: 01233 61 62 74
- Kent and Canterbury Hospital, Canterbury Telephone: 01227 78 30 58
- Queen Elizabeth the Queen Mother Hospital, Margate Telephone: 01843 23 43 70

If you have any questions between 6pm and 8am Monday to Sunday then contact accident and emergency (A&E) on:

- A&E, William Harvey Hospital, Ashford Telephone: 01233 61 62 07
- A&E, Queen Elizabeth the Queen Mother Hospital, Margate Telephone: 01843 23 50 30

A short film outlining what patients can expect when coming to hospital for an endoscopy is available on the EKHUFT web site www.ekhufft.nhs.uk/endoscopy/

If you develop any severe pain in the neck, chest, or abdomen within the first 24 hours of your procedure please phone accident and emergency (see telephone numbers above).

Our units are regularly inspected and audited; please ask if you want any information about our performance standards. You can also visit www.patientopinion.co.uk

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhufft.nhs.uk/patientinformation