Esophageal Dilation

What is esophageal dilation?

Esophageal [ih-SOF-uh-juh-uhl] dilation is a medical procedure used to widen a narrowed area of your esophagus [ih-SOF-uh-gus], the tube that connects the mouth to the stomach. Your doctor passes an instrument through your mouth and throat to the narrowed area and stretches it.

Why do I need this procedure?

If you have trouble swallowing or food often feels as if it’s stuck in your throat or chest, esophageal dilation can open up the narrowed area of your esophagus so that food can pass through more easily.

Several health problems can cause narrowed areas in your esophagus. The most common is acid reflux, when stomach acid leaks up into your esophagus. This causes scar tissue to build up and narrow the tube. Less-common causes are when extra rings of tissue grow at the lower part of the esophagus, there is scarring from radiation treatments or cancer of the esophagus, and when there are problems with the way the esophagus moves food to the stomach.

Potential benefits

• Improved ability to swallow
• Reduced pain

Risks and possible problems

• Inflammation (swelling) and painful swallowing
• A tear in the esophagus lining that may cause bleeding
• (If sedative medicines used) possible problems for people with heart or lung disease
• A hole in the lining of the esophagus that may require surgery to repair (rare)

Alternatives

If you need an esophageal dilation, there are no real alternatives. Not having a dilation when you need it could result in a more severe blockage and possibly a tear in the esophagus.
What do I need to do to prepare?

• Give your doctor a list of all your medicines. Be sure to include prescriptions, vitamins, herbal remedies, or any over-the-counter medicines you are taking (such as allergy pills or cough syrup).
• Follow your doctor’s instructions concerning your medicines. Some medicines can increase your risk of bleeding. You may have to stop taking them for a few days before the procedure.
• Arrange for a responsible adult to drive you home after the procedure in case you are given a sedative for the procedure.

What happens during?

Your doctor or nurse may spray your throat with a local anesthetic to keep you from coughing or gagging when the endoscope is inserted. A mouth guard may be used to protect your teeth and the endoscope.

You may be given a sedative to help you relax before the procedure. The sedative is given through an intravenous line (IV) inserted into a vein in your arm.

During an esophageal dilation your doctor will:

• Pass an endoscope (a long thin tube with a tiny camera on the end) through your mouth to look closely at your esophagus, stomach, and the first part of your intestine.
• Use either a small balloon attached to the endoscope to stretch the narrowed area or remove the endoscope and insert an instrument to stretch the narrowed area.

If you’re awake during the procedure, you may feel pressure in the back of your throat or your chest.

What happens after?

After it’s over, you:

• Will stay in a recovery area for a short time.
  If you were put to sleep during the procedure, you will need someone to drive you home, even if you feel fine.
• May have a sore throat for the rest of the day.
• Can have a drink when your throat numbness goes away and eat again the next day.

Will I need another dilation?

If your esophagus was very narrow, you may need to have more than one dilation. This allows the esophagus to be stretched slowly and carefully. It also decreases your chances of having problems again.

Once the esophagus is completely dilated, additional procedures may not be necessary. If your narrowing was caused by acid reflux, some medicines may decrease the need for additional procedures.

When should I call my doctor?

After your procedure, contact your doctor right away if you have:

• Stool (poop) that is black or has blood in it
• Difficulty swallowing or breathing
• A fever over 101°F (38°C)
• Chest pain