

# Transnasal Endoscopy

This leaflet explains about your transnasal endoscopy and what you can expect when you come to hospital. It also details the instructions on how to prepare for this test, including when to stop eating and what tablets you may need to stop. If you have any further questions or concerns, please speak to the staff member in charge of your care.

## What is transnasal endoscopy (TNE)?

TNE is a camera examination via the nose to the oesophagus (food pipe/gullet), stomach and duodenum (first part of the intestine). This can help to find the cause of your symptoms and to diagnose diseases of the digestive tract. The procedure itself takes five to ten minutes but please allow up to three hours in the department for the whole process to be completed. The tube is thinner than your little finger, does not interfere with your breathing, and allows you to speak during the procedure.

## Will I have an anaesthetic?

One of the advantages of TNE is that it is better tolerated than a gastroscopy, where the camera is passed through the mouth. This means the gag reflex is not usually triggered. As such we do not use sedation or a general anaesthetic for this procedure. Local anaesthetic sprays are used to numb the nasal passages and the back of the throat and this allows for an easier passage of the scope through the nose and into the oesophagus.

## What are the risks?

TNE is a safe procedure. The most common side effects are a sore throat/nose or a nosebleed and in most cases these will settle spontaneously. Very rarely the nosebleed will be heavy and you may need further treatment to stop the bleeding.

Other possible risks include:

- Missing abnormalities – this is a small risk and it is very rare to miss cancer.
- Bleeding from a biopsy – this is rare and often settles on its own without treatment.
- Perforation (a tear in the wall of the digestive tract) – this is also very rare (<1:10,000 risk). If this happens it would require a short stay in hospital including treatment with antibiotics and possibly surgical repair.
- Damaging loose teeth, crowns or bridgework if the camera is inserted via the mouth – this is rare.

## Are there any alternatives?

The transnasal route may not be suitable for patients who suffer from nose bleeds, have a deviated nasal septum, nasal polyps, liver disease, are taking anti-coagulants or are being seen for surveillance of Barrett's oesophagus.

Occasionally we may be unable to pass the scope through your nose, in which case we will complete the procedure through the mouth. For some conditions it may be possible to perform a CT scan. The disadvantage of this is that in many cases it is not so good at detecting disease and that a biopsy cannot be taken. The radiation involved in a CT scan is unsuitable for some patients.

## If my symptoms have stopped should I still come for the test?

**Yes.** It is important that you still come for the procedure. Your doctor has organised this test to ensure you have no problems in your upper digestive tract. Although the symptoms may have gone, it remains important to perform the examination.

## How can I prepare for TNE?

A clear view of the stomach is required for this examination to be successful and so it must be as empty as possible. It is very important to follow the advice given about preparation. This is detailed below:

- **PLEASE DO NOT EAT FOR SIX HOURS BEFORE THE TEST.** You can drink clear fluids (**no milk**) up until two hours before the procedure.
- If you are taking Warfarin or blood thinning medications such as Apixaban, Rivaroxaban, Dabigatran, Clopidogrel, Ticagrelor or Prasugrel, please contact us on the telephone numbers of page 4 of this leaflet under **Contact us**.
- The test may be affected if you are taking certain medications for the stomach. If this is the first time you are having this test, we recommend that you stop taking the following drugs for two weeks before your test: Ranitidine (Zantac), Lansoprazole (Zoton), Omeprazole (Losec), Pantoprazole (Protium), Esomeprazole (Nexium). This is so we can fully assess how your symptoms are affecting you.
- Take your other medications as normal.
- Please bring a list of your regular medications and any inhalers or sprays with you.

## Advice for diabetic patients

The period of starvation can upset your diabetes temporarily. For further advice about your diabetes, please contact us on the phone numbers on page 4 of this leaflet under Contact us. Alternatively you may wish to contact your diabetic nurse.

## On arrival at the endoscopy unit

- A nurse will check your details, including medications and allergies.
- The test will be explained again and you will be asked to sign a consent form.

St George's University Hospitals NHS Trust is a national training centre for endoscopy. Students and qualified trainees may be involved in your care. If you do not want students to be present please inform the doctor or nurse in charge.

## Asking for your consent

It is important that you feel involved in decisions about your care. You will be asked to sign a consent form to say that you agree to have the treatment and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously. If you would like more details about our consent process, please ask for a copy of our policy.

## What happens during TNE?

- Prior to the procedure, two local anaesthetic sprays will be used to prepare you for the procedure. These contain Lignocaine (Lidocaine) so please contact us on the numbers on page 4 if you are allergic to this medication. The first is used to numb and expand the nasal passage to help the endoscope pass through the nose. The second spray is used to numb the back of your throat and has a slightly bitter taste. The effect lasts approximately 30 minutes.
- The transnasal endoscope is gently inserted via your nose into your stomach. This is not painful and will not make breathing or swallowing difficult, but you may feel uncomfortable during the test. Careful continued slow breathing (through mouth or nose) may alleviate any discomfort. The nurse may need to clear saliva from your mouth using a small suction tube. If you gag you won't vomit as your stomach will be empty. The test takes approximately five to ten minutes.
- A biopsy may be taken during this test. You cannot feel this.

## Will I feel any pain?

You may feel some discomfort from the air that is pumped into the stomach. It should not hurt.

## What happens after TNE?

Following the procedure you will be taken to the recovery area. A nurse will give you a copy of the endoscopy report as well as some important discharge advice. If you need to arrange transportation or do not wish to take public transport, we can arrange a taxi to take you home, however you are responsible for the fare.

## Where do I go?

Please see your appointment letter for the location of your appointment and the hospital address below:

**Queen Mary's Hospital**, Roehampton Lane, London, SW15 5PN, Ground floor and follow the sign posts to the Day Case Unit.

**Nelson Health Centre**, Kingston Road, London, SW20 8DA. Please go to Area 7, Endoscopy & Minor Ops Unit, Second Floor.

## Is there parking at the hospital?

Queen Mary's Hospital and the Nelson Health Centre each have a car park on site. Please ensure you check the rates before parking.

## Results / Will I have a follow-up appointment?

Upon completion of the TNE the findings will be discussed with you. We will be able to tell you of any visual findings, however any samples will be sent to the laboratory for testing. This can take up to three weeks. The report will be sent to your referring doctor and your GP. If required, a follow up appointment will be sent to you through the post.

## Contact us

If you have any questions or concerns about your TNE, you can contact us on the following numbers below Monday to Friday 8.00am to 4.00pm.

Queen Mary's Hospital 020 8487 6466  
The Nelson Health Centre 020 8725 8135



**For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.stgeorges.nhs.uk](http://www.stgeorges.nhs.uk)**

## Additional services

### Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer). **Tel:** 020 8725 2453 **Email:** [pals@stgeorges.nhs.uk](mailto:pals@stgeorges.nhs.uk)

### NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. **Web:** [www.nhs.uk](http://www.nhs.uk)

### NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones. **Tel:** 111

### AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website ([www.accessable.co.uk](http://www.accessable.co.uk)). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.