

Melbourne Swallow Analysis Centre

Transnasal Oesophagoscopy (TNO)

Your surgeon has recommended a transnasal oesophagoscopy. It is your decision to proceed with this procedure and this document will give you more information about the procedure, its risks and benefits. If you have any further questions that are not covered by this document, please ask your surgeon or healthcare team.

What is the oesophagus?

The oesophagus connects the throat to the stomach and is colloquially known as the 'food pipe'. Part of it is located in the neck, whilst the remainder is in the chest, hence it can cause symptoms anywhere from the middle of the neck down to the stomach.

What is a TNO?

- A test to look at your oesophagus (food pipe).
- It will also include an assessment of your larynx and throat as well as part of the stomach.
- It uses an endoscope. This is a small tube with a tiny camera on the end of it that attaches to a TV screen.
- The small tube goes in the nose and is moved to the back of your throat.
- It helps the doctor work out what is causing your symptoms.
- It also has small channels through which the doctor can pass small instruments to perform biopsies, or perform treatments.
- TNO is important for assessing your swallowing problems, but may be part of a number of tests to make a diagnosis.

What are the benefits of TNO?

- You avoid needing a general anaesthetic or sedation.
- It is done during an outpatient appointment so you don't need to be admitted to hospital.
- You will recover after a short period of time and are able to drive yourself home.

What are the risks of TNO?

- Like any procedure, there are risks, however they are uncommon and mild in nature.
- Risks can include coughing, nausea, nose bleeding and fainting. Damage to the side wall of the food pipe, known as perforation, is extremely rare.
- Some people find the test mildly uncomfortable but recovery is rapid.

What are the alternatives to TNO?

- A direct laryngoscopy/ oesophagoscopy can be done as a day procedure under general anaesthetic.
- This, however, cannot assess the lower food pipe and in some cases would also require a gastroscopy by a gastroenterologist, which requires sedation.

What happens?

- You should fast for 4 hours before the test. If your appointment is mid-morning, you may wish to have a light breakfast prior to 7am.
- You will be awake for the test.
- Your nose and throat will be sprayed with a local anaesthetic. Sometimes you will be given a small amount of local anaesthetic to swallow.
- The tube goes in the nose and to the back of your throat. It then passes down through your oesophagus (food pipe) into your stomach.
- Some air is used to gently inflate the oesophagus and stomach to help see the entire lining tissues.
- This air is removed by the scope at the conclusion of the procedure.
- You will still be able to breathe normally.
- Pictures and videos will be taken throughout the examination as a record.
- Sometimes, a biopsy will be taken by placing a fine flexible biopsy forcep through a channel in the scope and small tissue samples of the larynx, oesophagus or stomach lining will be taken for further analysis.
- You will not feel these biopsies.

What happens after the test?

- The test takes approximately 10-15 minutes, after which you are able to leave the clinic.
- You will be told about the results on the day, but if biopsies (small tissue samples) are taken, they will take a few days to be processed, and be explained to you in a follow-up appointment.
- You should not eat or drink for 30 minutes after the procedure as your throat may still be numb. When recommencing oral intake, it is recommended to start with small amounts of your normal food or drink and ensure you are not coughing during the swallow. This may mean you need to wait another 15-30 minutes for the numbing medicine to wear off.

Summary:

Transnasal oesophagoscopy is a safe and effective way of assessing your throat, food-pipe and stomach without the need of a general anaesthetic or sedation. Depending on your condition, it may be the only test or may be one of a few required tests to help assess and treat your swallow. Complications are uncommon but may happen and it is important you consider the details in this document if you wish to proceed.