

## Patient information

# Outpatient Injection Banding of Oesophageal Varices

### Gastroenterology

Your doctor has advised you to have the veins in your oesophagus (gullet) injected or banded.

#### **What is banding of oesophageal varices?**

Oesophageal varices are dilated veins in the oesophagus (gullet), which if left untreated run the risk of bleeding, as the larger they become the greater the risk of heavy bleeding.

Banding is a procedure that can be performed, again by passing a flexible telescope down into your gullet with a device attached to the tip of the telescope. This device contains several rubber bands that can be used to capture the protruding veins and 'strangle' them thus reducing the risk of bleeding. It may take more than one treatment to ensure that the risk of bleeding is reduced by destroying the dilated veins.

We are a large teaching Trust and so we are involved in teaching students and in research work. Qualified doctors and nurse practitioners in training to perform endoscopy may perform your test under supervision by a skilled endoscopist. You may also be asked to take part in research. If you do not feel happy about this, please tell a member of staff. You have the right to refuse and your decision will not affect your treatment in anyway

#### **What are the risks?**

There could be significant bleeding caused by the procedure, which will necessitate possibly a further intervention either at the time, or by the X-ray specials techniques department.

Although the risk of bleeding during the procedure is small, there are about one in 500 patients that experience bleeding requiring further intervention and a blood transfusion.

You must tell the nurse if you have any loose teeth or caps, crowns or veneers as there is a risk they could become dislodged.

#### **Are there any alternatives to this procedure?**

Banding or injection of varices in the gullet is the best and safest treatment if they have been bleeding or the doctor is trying to prevent them from bleeding. In severe or exceptional cases there are more complicated alternatives, which you can discuss.

## **What will happen if I don't have this procedure done?**

You will run the risk of the varices bleeding heavily which can be life threatening.

## **What anaesthetic or sedation will I be given?**

It is usual to give a small amount of anaesthetic throat spray to numb the back of the throat in order to pass the telescope over the back of the throat. Sedation can be given alongside that by an injection into your arm. This will make you drowsy and relaxed. You will not be unconscious and you will be given oxygen through your nose.

The medicines used in sedation may affect your memory or concentration for up to 24 hours. Many patients remember nothing about the procedure or even what the doctor has said to them afterwards.

## **You must arrange for a friend or relative to collect you from the Gastroenterology Unit and we recommend they stay with you afterwards.**

A side effect of these medicines is to slow your breathing – this should not normally happen but sometimes patients can be oversensitive to the medicines. This is the main reason we do not give high doses of these medicines. We also will give you oxygen during the procedure.

## **If you are worried about any of these risks, please speak to your consultant or a member of their team before you are due to have this treatment.**

## **Getting ready for the procedure**

- Do not have anything to eat or drink for at least six hours before the procedure.
- This is to ensure the doctor gets a clear view and makes the procedure safer.
- You can drink small amounts of water for up to two hours before your appointment time.
- You will be asked to remove any tight clothing, ties, dentures, spectacles and contact lenses.
- Please do not bring large amounts of money or valuables with you, as the Trust cannot be held responsible for them.

When you come to the department, please tell the doctor or nurse about any medicines you are taking, any possible allergies or bad reactions you may have had in the past or any heart problems which may require antibiotics before your procedure.

## **What will happen next?**

The nurse will check your details and record your blood pressure, pulse and weight. You may wait a while before you are called through for your procedure.

## **After your procedure**

After your examination/treatment you will be taken into the recovery area and allowed to sleep. Oxygen will continue to be given and the nurse will record your blood pressure, pulse and temperature if necessary. When you are fully awake you will be helped from the trolley and escorted to the seated area where you will be given a drink.

It is quite likely that your throat will feel slightly sore, it is important to tell the nursing staff if you have any pain. You will need to stay in the department for up to four hours before being discharged home once your escort has arrived. You are advised to take 'warm' drinks only, not hot, and eat a 'sloppy diet' until the following evening.

**If you get any pain in your neck, chest or abdomen (tummy) stop eating and drinking and attend your nearest Accident and Emergency Department taking any information you have been given.**

### **For next 24 hours you must not:**

- Travel alone.
- Drive any vehicle.
- Operate machinery (including domestic appliances such as a kettle).
- Climb ladders.
- Make important decisions, sign any business or legal documents.
- Drink alcohol.
- Return to work within 12 hours of treatment. Your general health and any medicines you are taking may increase the time you need off work.

### **You should:**

- Take it easy for the rest of the day, avoid strenuous activity.
- Take your medications as usual.
- Let someone else care for anyone you usually look after, such as children or elderly or sick relatives.

## **Results**

A doctor or a nurse will be able to give you information as to the result of your examination/treatment and any other information can be given to you once you are fully awake from your sedation in the presence of your escort with your consent.

## **Cancellations**

If you are unable to keep this appointment, please let us know as soon as possible on  
**Tel: 0151 706 2656**

**Text phone number: 18001 0151 706 2656.**

We will be able to give your appointment to another patient and arrange another one for you.

## Transport

- Transport has not been arranged for this appointment so it will be necessary for you to make your own arrangements.
- Parking for patients and visitors is available at the Q-Park multi-storey car park.
- The entrance by car is on Epworth Street off Erskine Street. The car park is open 24 hours a day, seven days a week. This is a private car park and charges apply. The car park is continually monitored by parking hosts, and CCTV. There are ten disabled spaces on the entry level of the car park. If you need help, please speak with a parking host at the car park entrance. Disabled parking is still available at the rear of the hospital.
- If you have been referred to us from clinic and usually have an ambulance to bring you for your appointment, please contact us as soon as possible on **Tel: 0151 706 2656**  
**Text phone number: 18001 0151 706 2656.**
- If you have been referred to us by your family doctor (GP) and need an ambulance please contact their surgery.

## Further appointments

You may receive a clinic appointment to see your Consultant before you leave the Unit or you will receive one in the post.

### Important: If you have:

- ❖ **Diabetes**
- ❖ **Are taking: (warfarin tablets, clopidogrel (plavix) tablets)**
- ❖ **Anticoagulants:**
  - Warfarin
  - Heparin /low molecular weight heparin (including enoxaparin/dalteparin
  - Dabigatran
  - Rivaroxiban
  - Sinthrome
  - Apixaban
  - Fondaparinux
  - Edoxaban
- ❖ **Antiplatelet therapy:**
  - Clopidogrel (Plavix)
  - Prasugrel (Efient)
  - Ticagrelor (Brilique)
  - Dipyridamole (Persantin) and aspirin
- ❖ **Are on dialysis.**
- ❖ **Have suffered a heart attack within the last three months.**

You must contact the Gastroenterology Unit as soon as you receive this information leaflet.

**Tel: 0151 706 2656**

**Text phone number: 18001 0151 706 2656**

## **Feedback**

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

## **Further information**

**If you have any questions or queries, please contact the Gastroenterology Unit during the following hours**

<b>Monday – Thursday</b>	<b>0800 – 2100 hrs</b>
<b>Friday</b>	<b>0800 – 1700 hrs</b>
<b>Saturday/Sunday/BH</b>	<b>0800 – 1600 hrs</b>

**Tel: 0151 706 2656/ 2819/2726**

**Text phone number: 18001 0151 706 2656/2819/2726**

**Clinic appointment enquiries**

**Tel: 0151 706 5555**

**Text phone number: 18001 0151 706 5555**

**The Emergency Department (A&E) is open 24 hours**

**Tel: 0151 706 2051/2050.**

**Text phone number: 18001 0151 706 2051/2050**

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All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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