

Patient information

Salivary Gland Balloon Dilatation or Stone Removal Appointment Details

Imaging Department

Before your examination

Your hospital doctor or family doctor (GP) has advised that you need a Salivary Gland Balloon Dilatation or Stone Removal. You may wish to discuss alternative treatments or procedures. Please ask a doctor or nurse if alternative treatments or procedures are available.

There is no need for any special preparation before this examination. You should eat and drink normally.

Please tell us if you have:

- Severe asthma
- A known allergy to Iodine
- If you have a bleeding problem or are taking medication that may make you bleed abnormally.

Female patients - if you are pregnant or there is any possibility of you being pregnant, please contact the X-ray department before your appointment.

What is a balloon dilatation and stone removal?

Your recent sialogram examination identified a narrowing in the duct of one of your salivary glands or the presence of a salivary stone. Balloon Dilatation is a treatment to widen a narrow area of duct. If a stone is present a special tube contain a wire basket can be introduced in the duct to capture the stone and then withdraw it into your mouth. A small cut is often required at the duct opening to allow the stone to be delivered.

What are the benefits of having this treatment?

This procedure should improve the flow of saliva from your gland, reducing any symptoms of pain or swelling of your salivary gland that you may be experiencing when you eat.

The risks of having a balloon dilatation or stone removal with a wire basket include:

Allergy to Iodine

A dye will need to be introduced into your salivary duct in a similar way to your sialogram. The dye contains Iodine and therefore any patients who are allergic to Iodine should not have this procedure carried out.

Please also tell us if you are asthmatic or if you have any serious allergies to any other substances.

Blood Clotting

These procedures may cause some trauma to the duct or may require a small cut at the duct opening, which could result in some bleeding. This is not normally of any significance but if you bleed abnormally, please let us know before your appointment.

X-rays

We are all exposed to natural background radiation every day of our lives. Each X-ray examination gives us a small additional dose. The dose varies with each examination. Everything is done within the X-ray department to reduce this dose.

What sort of anaesthetic will be given to me?

You will be given a local anaesthetic. Local anaesthetic is drug-induced numbness: it may be provided by an anaesthetist, surgeon or other healthcare professional, depending on the technique used.

Unfortunately, local anaesthetic can cause side effects and complications. Side effects are common, but are usually short-lived: they include nausea, confusion and pain. Complications are very rare, but can cause lasting injury: they include awareness, paralysis and death.

The risks of anaesthetic and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well. For more information, please ask for a copy of the leaflet "You and Your Anaesthetic" (PIF 344).

If you are worried about any of these risks, please speak to your Doctor or a member of their team.

The examination

A fine sterile plastic tube is inserted into the opening of the duct that leads to your salivary gland, either just under the front of your tongue, or on the inside of your cheek.

Some dye is slowly introduced through the tube to identify the narrow area in the duct.

To widen a narrow section of the duct, this tube is replaced with another tube that has a thin balloon on the end of it. This will be positioned in the narrow area and will then be inflated to widen it.

If a stone is present, a tube containing a wire basket can be inserted into the duct and positioned next to the stone. The wire basket is then pushed out of the tube to enclose the stone and the tube and stone are slowly removed together. This technique can only be performed if the stone is quite small and can easily pass along the duct. If the stone becomes stuck in the duct during the procedure, an immediate referral to have the stone surgically removed would be required, but this is very rarely necessary.

The position of the tube is monitored by using a low dose X-ray technique (Fluoroscopy).

Will it hurt?

Both these procedure are carried out under local anaesthetic, but when the duct is dilated with the you may still notice a feeling of tightness in the gland, which can be uncomfortable. However, this only lasts for a few seconds.

How long will it take?

Generally you should allow 45-60 minutes.

After the examination

Your gland will feel sore and swollen for up to a week and you may find it difficult to open your mouth widely.

It is recommended that you have a soft diet during this time and take painkillers (whatever you normally take for headaches). If your job involves a lot of talking, you may wish to take one or two days off work.

Results

After the examination you will be reviewed either in the X-ray department or by the doctor who referred you for this treatment. If you have not been given an appointment, you should contact the X-ray Department Interventional Theatres or the clinic, where you were seen originally, to make one. Make an appointment about four weeks after your treatment was carried out.

Cancellations

If you are unable to keep this appointment, please let us know as soon as possible and we will arrange another for you.

If you fail to cancel and do not attend you will not be sent another appointment.

Transport

If you have been referred to us from clinic and usually have an ambulance to bring you for your appointment, please contact the Appointments Office as soon as possible.

If you have been referred to us by your GP and need an ambulance, please contact your GP surgery.

Parking for patients and visitors is available at the Q-Park multi-storey car park opposite the main hospital entrance on Prescott Street. 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 care park and charges apply. The car park is continually monitored by parking hosts, and CCTV.

There are disabled spaces within 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.

Please bring this leaflet with you when you attend the X-ray department.

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 further questions, or require further information, please contact Interventional Theatres

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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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در صورت تمایل می‌توانید کلیه اطلاعات تصویب شده توسط اتحادیه در رابطه با بیماران را به اشکال مختلف در دسترس داشته باشید، از جمله به زبانهای دیگر، به زبان ساده، چاپ درشت، صوت، خط مخصوص کوران، مون و بصورت روی خطی موجود است.

زانیاری پیوندیدار بهو نه‌خوشانه‌ی له‌لایمن تراستهوه پاسهند کراون، نه‌گهر داوا بکرنیت له فورماتمکانی تردا بریتی له زمانمکانی تر، نیزی رید (هاسان خویندنهوه)، چاپی گموره، شریتی دهنگ، هیلای موون و نه‌لیکترونیکی هیه.

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