

Patient information

Outpatient Radiofrequency Ablation (RFA) of Gastric Antral Vascular Ectasia

Gastroenterology

Your consultant or doctor has advised you to have radiofrequency ablation (RFA) treatment for your condition.

What is RFA?

This is where high frequency electrical current is used to improve bleeding from your stomach caused by abnormal superficial blood vessels; called gastric antral vascular ectasia (GAVE). The procedure is usually very straightforward. It will initially involve an endoscopy (gastroscopy) to look at these areas (see gastroscopy leaflet). A device is then either passed down through or fitted on to the end of the gastroscope and the instrument passed again to provide treatment.

What are benefits of RFA?

The aim of RFA is to seal the blood vessels and reduce bleeding from your stomach. This may involve more than one treatment over several appointments depending on how much disease is present in the stomach and how well you respond to first procedure.

What are the risks of RFA?

Perforation

It is possible to damage the lining of the gullet (oesophagus) when the gastroscope is passed with the device fitted to the end. This is very rare, with a risk of less than 1:1000 procedures. It may however be serious and require inpatient treatment which may include an operation.

Bleeding

Occasionally, bleeding may occur from abnormal tissue which is being treated in the stomach. This usually settles on its own and very rarely needs treatment.

Ulceration of the stomach

As the procedure causes damage to the inner lining of the stomach to treat the abnormal blood vessels, stomach ulceration may occur. This is rarely serious. You should be taking treatment to reduce stomach acid already; if you are not you should receive a prescription for such medication to take for a month after treatment.

Are there any alternatives to this procedure?

Gave is usually treated by using iron replacement treatment and blood transfusion. The endoscopic treatment is designed to reduce the need for such therapy.

Different endoscopic treatments are available which treat this condition; you may already have had treatment undertaken or your doctor may believe your GAVE is best treated by RFA.

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

You will continue to need iron replacement therapy and blood transfusion.

What anaesthetic or sedation will I be given?

It is usually not possible to use this treatment without sedation. An injection is given into your arm that will make you slightly drowsy and relaxed. You will not be fully unconscious. 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 escort you home 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 medicine. This is the main reason we do not give high doses of these medicines. We also will give you oxygen during the test.

In addition to sedation, you may also receive a local anaesthetic spray to numb your throat.

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

Getting ready for your procedure

- Do not have anything to eat or drink for at least **six hours** before your test. This is to make sure that we can have a clear view of your stomach.
- You must tell the nurse if you have any loose teeth, caps, crowns or veneers as there is a risk they could become dislodged.
- 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 valve problems that may require antibiotics before your procedure.

Your procedure

An endoscope is used to perform a diagnostic procedure as a prelude to providing treatment with RFA. If this type of treatment needs to be undertaken an RFA device can be passed through the endoscope and treatment commenced. Alternatively, the endoscope may be removed from your stomach, an ablation device fitted, and the endoscope reintroduced through the mouth.

The abnormal area in the stomach is then identified and treatment undertaken. The RFA is delivered through the ablation device to the tissue being treated. It is accompanied by a bleeping noise as the machine works. Treatment is not painful.

The whole procedure can usually be completed within 30 minutes.

After your procedure

- After the procedure you will be taken to the recovery area to rest for up to an hour. It is quite likely that your throat will feel slightly sore. You may also have some bloating of your tummy.
- It is important to tell the nursing staff if you have any pain.
- You will have your pulse, blood pressure and if necessary your temperature taken to ensure there have been no complications.
- You will need to remain in the department for up to four hours before being allowed home and the nursing staff will want to ensure that you are able to swallow satisfactorily before you are discharged.

For next 24 hours you must not

- Travel alone.
- Drive any vehicle e.g car, scooter, or ride a motorcycle or bicycle..
- 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

The outcome of the procedure and any other information can usually be given to you once you are fully awake from your sedation.

You may leave the department once your escort has arrived, you have had a drink of water, you have been given relevant information and been discharged by your nurse.

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

Cancellations

If you are unable to keep this appointment, please let us know as soon as possible

Tel: 0151 706 2720.

Text phone number: 18001 0151 706 2720

We will be able to give your appointment to another patient and arrange another 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 disabled spaces within the car park. If you need help, please speak with a parking host at the car park entrance.
- If you have been referred to us from clinic and usually have an ambulance to bring you for your appointment, please contact us on Tel: 0151 706 2720 as soon as possible. Text phone number: 18001 0151 706 2720
- If you have been referred to us by your family doctor (GP) and require an ambulance please contact their surgery.

Further appointments

Follow-up arrangements will be made for you before you leave the Endoscopy Unit.

Important: If you have:

- ❖ **Diabetes**
- ❖ **Are on dialysis**
- ❖ **Have suffered a heart attack within the last three months**

❖ **Are taking:**

➤ **Anticoagulants:**

▪ **Warfarin**

- Heparin/low molecular weight heparin (including enoxaparin/dalteparin)
- Dabigatran
- Rivaroxiban/Apixaban
- Sinthrome

➤ **Antiplatelet therapy:**

- Clopidogrel (Plavix)
- Prasugrel (Efient)
- Ticagrelor (Brilique)
- Dipyridamole (Persantin) and aspirin

You must contact the gastroenterology unit as soon as you receive this information leaflet.

Tel: 0151 706 2720

Text phone number: 18001 0151 706 2720

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**

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

Tel: 0151 706 2819/2726

Text phone number: 18001 0151 706 2720

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

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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