

Pneumatic Balloon Dilation

Important! This exam requires that you have an empty stomach. You should not consume any food for 12 hrs before the procedure. After that, you may drink clear* liquids only - but 4 hrs before the exam, stop all liquids including water (minimal sips are allowed only to take your usual medications). Avoid gum and hard candy.

Medications: If you take insulin or other diabetic medicines, dosage adjustments will be provided for you. Bring your insulin with you so that you can take it later if needed. If you are on blood thinners such as Plavix, Coumadin, Eliquis, Xarelto, or any other medications that thin your blood, let us know at the time of scheduling because they may need to be held. All other meds should be taken at their usual time with a few sips of water.

What is it and why do I need it?

This procedure is used for patients with a condition called achalasia. Under endoscopic and x-ray guidance, a special larger-than-typical balloon is used to stretch and partially tear the muscle at the bottom of the esophagus to improve swallowing.

Achalasia is a condition characterized by poor movement of the main esophagus muscle and poor relaxation of the sphincter muscle at the bottom of the esophagus leading into the stomach. This results in trouble swallowing, regurgitation and difficulty eating. Little can be done to improve the poor esophagus muscle movement, but the sphincter muscle at the bottom of the esophagus can be opened to allow food to empty more effectively into the stomach.

The risks

You will be asked to sign a consent form at the time of the exam. Most risks of the procedure are low (under 1%), but do include bleeding, infection, tearing of the lining, aspiration, medication reactions and heart/lung problems. The greatest risk of the exam is perforation, which occurs 4% of the time. If you have concerns about these risks, please contact your physician before your procedure. You will also be able to discuss this with your physician at the time of the exam.

The procedure

In the preparation area, you will be asked questions about your health history. Portions of the procedure are very similar to the upper endoscopy **(EGD)** so please refer to that exam. Your procedure usually takes 20-30 minutes and you will be sedated for it. Once you are asleep, a balloon will be inflated across your lower esophageal sphincter using endoscopic and x-ray guidance. Your physician will then withdraw it looking for any abnormalities that need to be biopsied or treated.

After the procedure

In the recovery unit, your physician will discuss the results with you and give you discharge instructions. You and your driver will remain there until your sedation has worn off to a satisfactory level. You will undergo a gastrograffin swallowing x-ray test to ensure there has been no tear in your esophagus. After discharge, you may have some throat or chest discomfort. You may resume your usual activities and diet and return to work the following day. However, you may not drive, make important decisions or operate machinery the rest of the day. You must have someone at least 18 yrs old with you during the entire time from check-in through recovery and to drive you home after the exam (a taxi or bus is not an option). A report will be sent to your referring physician.

^{*}A clear liquid diet includes water, coffee (only if you must; please limit coffee intake to 8 oz and must be black, no cream or non-dairy creamer), tea, soda, broth or clear juice like apple juice or white grape juice, popsicles, and Jell-O (no added fruit). Avoid red colors. No milk products.