

Having a transnasal endoscopy (TNE) to examine your upper digestive system

Department of Endoscopy

Information for Patients

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Introduction

You have been told by your GP or hospital doctor that you need an investigation known as a transnasal endoscopy (TNE) examination.

If you are unable to keep your appointment please call us as soon as possible. This will allow us to give your appointment to someone else.

What is a TNE?

A TNE (also called ultrathin endoscopy) is a 10 to 15 minute examination, where a thin flexible tube called an endoscope is passed through your nose and down the back of your throat. This will let us look directly at your food pipe which passes down to reach the stomach (oesophagus), the stomach and around the first bend of the small intestine (duodenum). The endoscope is thinner than your little finger. It will not get in the way of your breathing at any time, because it passes down your oesophagus and not your windpipe. You can breathe normally during the procedure. This procedure is done by a specially trained nurse or doctor, called an endoscopist. The procedure examines the same part of your body as an oesophago-gastro-duodenoscopy (OGD) (gastroscopy). The main difference is that this endoscope is much thinner and goes down your nose rather than your mouth.

Why do I need to have a TNE?

- To try to find the cause of your symptoms such as pain in your stomach, difficulty with swallowing, indigestion, anaemia, vomiting/ vomiting blood or passing black poo.
- To look at something seen on an X-ray in more detail.
- Follow-up after a previous procedure.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

Taking a sample of tissue (biopsy) during the procedure

Sometimes the nurse or doctor doing the test will take a small piece of tissue (a biopsy) from the lining of your oesophagus, stomach or duodenum, so it can be looked at in a laboratory. This is not usually painful.

How long before my procedure do I need to stop eating and drinking?

To allow us to get clear views during the test, your stomach must be empty. **Do not have anything to eat or drink for 6 hours before your test.**

If these instructions are not followed your procedure will be cancelled and will need to be re-booked for another day.

What about my medication?

- **Routine medication:** all routine medication should be taken as normal unless you have been told otherwise by your doctor. Please take morning medication before 6am.
- **Anacid or digestive medication:** if you are taking medication to reduce the acid in your stomach, please stop taking this 2 weeks before the procedure. However if you are having a follow-up TNE to check for healing of an ulcer found during the last 2 to 3 months, you can keep taking this medication right up to the day before your repeat procedure. If you are not sure please telephone the Endoscopy Department for advice.
- **People with diabetes:** where possible you will be booked at the beginning of the list. Due to demand for this test, this may not always be possible. If you have not received a diabetes information leaflet, please contact the Endoscopy Department or visit our online store of leaflets www.yourhealth.leicestershospitals.nhs.uk. Before you go home we will offer you a drink and biscuits, but please bring a snack if you need anything else.
- **Blood thinning medication (anticoagulants):** if you take any blood thinning medication, please contact the Endoscopy Department or the Endoscopy Booking Team for advice.

How long will it take?

This will depend on how busy we are and how quickly you recover after the procedure. You can expect to be with us for 2 to 4 hours. This may be longer during busy periods, but we do aim to keep waiting times to a minimum. As we also provide emergency procedures, sometimes these may need to take priority over the outpatient booking list.

What happens when I arrive?

When you arrive please book in at the reception desk. A nurse will take you from the waiting area to an admission room on the ward. We do not allow relatives into the unit, due to regulations and for the privacy of our patients.

Admission:

- A nurse will check your personal details.
- The nurse will confirm the information you have completed before the appointment (sent with your appointment letter). This information will include medication you are taking, your medical history, any operations or illness you have had, and any current health problems.
- The nurse will need to know if you have any allergies or bad reactions to drugs.
- If you are having sedation, the nurse will check that you have a responsible adult to take you home when you are ready to be discharged. You only need to have someone take you home if you have sedation.
- Your blood pressure, heart rate, temperature and oxygen levels will be recorded and if you are diabetic your blood glucose level will also be recorded.
- You do not need to remove any clothing for this procedure.

For the short time you are with us we want to provide a safe and supportive environment. Do not be afraid to ask any questions at this stage, if you have any worries.

Sedation

Sedation is not necessary for this procedure, but if you feel very anxious you can talk to the endoscopist about this, before your procedure.

Older people and those with significant health problems may need additional assessment before sedation can be considered.

If you have sedation, an adult must take you home and stay with you for 12 hours. If you are being transported by ambulance you must have someone waiting at home to stay with you.

It is important that you understand the sedative injection can last longer than you think, and can stay in your body for up to 24 hours. For 24 hours after sedation you should **not**:

- drive a car, ride a bicycle or climb ladders.
- operate machinery or do anything needing skill or judgment.
- make important decisions or sign any documents.
- drink alcohol.

Anaesthetic spray

10 minutes before the procedure a local anaesthetic spray is given, 3 to 4 times, into the nose and sometimes to your throat, to numb the upper airways. The spray allows the nostrils to expand, which helps the endoscope go down the nasal passage. Your gagging reflex will not be triggered as the tube goes through the nose.

The benefit of having just the anaesthetic spray is that you are fully awake and aware, and can go home unaccompanied soon after the procedure. You can drive and carry on as normal.

After the spray you will not be able to eat or drink for 45 minutes. Your first drink after the spray must be cold and should be sipped to avoid choking.

What happens during the procedure?

- In the procedure room you will have the opportunity to ask any final questions.
- You will be asked to remove any dentures.
- The local anaesthetic spray will be sprayed into your nostrils and the back of your throat whilst you are sitting up, and you will be asked to swallow this. You will quickly notice that your tongue and throat become numb but you will still be able to swallow and breath normally.
- The nurse looking after you will ask you to either sit leaning back or lie on your left side, then will place the oxygen monitoring probe on your finger.
- If you decide to have sedation, it will be given at this time, into the cannula in your vein. Your blood pressure, oxygen levels and heart rate will be closely monitored during the test.
- Any saliva or other secretions produced during the procedure will be removed using a small suction tube e.g. like the one used at the dentist.
- The endoscope will be gently inserted through your nose, down your food pipe (oesophagus) into your stomach. Your breathing will not be affected.
- You will be able to talk during the procedure; the procedure can will be stopped at any time if you request it to be.
- Samples may be taken from the lining of your stomach or food pipe and sent for testing. This is not usually painful. Photographs may also be taken but this doesn't mean that there is something wrong.
- If it is not possible to pass the endoscope successfully through your nose, we may ask you if we can try the same procedure through your mouth, or give you another appointment. If you are unable to tolerate the procedure, other options will be discussed with you.

What happens after the procedure?

- You will be allowed to rest for as long as you need. Your blood pressure, heart rate and oxygen levels will be recorded, and your blood glucose level will be checked if you are diabetic.
- A nurse will look after you until you are ready to go home.
- If you have not had sedation, you can expect to go home within 30 minutes of the procedure.
- If you have had sedation you will be monitored in the recovery area for at least 30 minutes but this could be up to 2 hours.
- We will tell you what time you can start drinking again. After the throat spray has worn off, you can eat and drink as normal.
- Before discharging you we will offer you a drink and biscuits but please bring a snack if you would like anything else.
- If you have had sedation a responsible adult will need to collect you to take you home.

When will I get the results?

You may not see the person who performed your procedure before going home, but a nurse will tell you the results before you leave. If you have sedation it is best to have someone with you for this, as many people find they forget what has been said to them after sedation.

If a sample (biopsy) has been taken, the result can take several weeks and this will be sent onto your referring doctor. You may then be given an outpatient appointment to discuss your results or a letter informing of you of the results.

A report of the procedure will automatically be sent to your GP and you will normally receive a copy on the day.

What are the risks of the procedure?

The main risks of the procedure are:

- a sore nose or nose bleed.
- perforation or tear of the lining of the stomach or oesophagus (about 1 in 10,000 cases).
- bleeding (1 in 5000 cases).
- bleeding at the site of a biopsy (which almost always stops on its own).
- chest infection.
- a reaction to the anaesthetic spray or medication used.
- being unable to complete the examination.

Is there an alternative procedure?

A gastroscopy is an alternative procedure to a TNE, where the endoscope is inserted into your mouth instead of your nostril. A TNE is a more comfortable procedure as gagging is very rare and you are able to talk during the procedure.

Another alternative is to have a barium meal examination which involves having an X-ray after drinking some barium liquid. This test involves radiation and is less accurate than an endoscopy. You may still need an endoscopy if any abnormalities are found. Also, biopsies of the gut or abnormal tissue growths (polyps) can't be taken during a barium test, so you may still need to have an endoscopy to do this.

Contact details

If you are unable to make your appointment please let us know as soon as possible, so we can offer this to someone else.

If you have any queries about your appointment please contact the **Endoscopy Booking Team on 0116 258 6984** (10am to 4pm).

If you have any queries about your procedure please contact the appropriate Endoscopy Department:

Leicester General Hospital:	0116 258 4183
Leicester Royal Infirmary:	0116 258 6997
Glenfield Hospital:	0116 258 3130
Hinckley and District Hospital:	01455 441970
Loughborough Hospital:	01509 564402
Melton Mowbray Hospital:	01664 854904
St Lukes Hospital Market Harborough:	01858 448344

Trainees and student observers

Leicester's Hospitals support trainees and students from the county's medical school and nurse training school. We hope you will be willing for trainees with the relevant skills to perform procedures under supervision where appropriate, and for student observers to be present.

If you would rather not have trainees or students in the room during your procedure, please let us know.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

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