

Disclaimer

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What is endoscopy & microlaryngoscopy?

This is examination of your throat, oesophagus or 'voice box' (larynx) using solid metal tubes called endoscopes. This is done in the operating theatre under general anaesthetic, usually as a day case procedure. When examining the larynx this is often combined with using a microscope to look at the larynx in more detail and enable surgical procedures, such as removal of polyps or nodules. Sometimes surgery is performed using a Laser.

Why have the operation?

Endoscopy is done to investigate throat symptoms such as hoarse voice, persistent sore throat and swallowing problems. Sometimes the procedure will improve or cure the symptom by removing abnormal tissue, such as polyps, or stretching a narrowing in the throat or oesophagus.

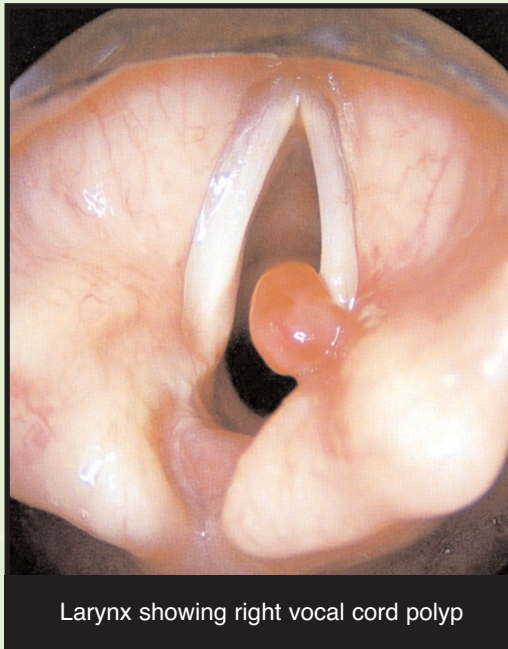
What if I do not have surgery?

Following initial assessment and investigations in the outpatient clinic there is really no alternative if further investigation is required. Endoscopy with rigid metal endoscopes is the best way to examine the throat (pharynx) and upper oesophagus. The lower oesophagus and stomach is best examined with a flexible, fiberoptic gastro-oesophagoscope. This is done by a gastroenterologist and if required your surgeon will make the necessary referral.

Sometimes small nodules and polyps on the vocal cords will resolve with the help of speech therapy. If your surgeon is confident a nodule/polyp on the vocal cord is not a tumour he/she may refer you to a speech therapist for initial treatment.

Before the operation

If working, you will need to arrange to take a few days off work. In most cases you can go back to work 2 or 3 days after the procedure. You should inform your surgeon if you are taking Aspirin and it may be advisable to stop this before the procedure. You should also inform your surgeon if you have any neck problems, loose teeth or a fixed dental plate.



Larynx showing right vocal cord polyp

About the operation

Endoscopy is carried out under general anaesthetic and usually takes 15-30 minutes. The operation may take longer if a therapeutic procedure, such as excision of a tumour in the larynx, is performed. The metal endoscope is passed via the mouth to examine the larynx, pharynx or oesophagus. The upper teeth or gum is protected with a swab or soft rubber guard. If there are areas in the lining (mucosa) of the throat or larynx which look abnormal a sample will be taken to be examined in the laboratory. This is called a biopsy. If there is a narrowing of the pharynx or oesophagus it may be possible to dilate this using bougies.

After the operation

Your throat may be a little sore and your neck stiff for a few days. Simple painkillers should help this settle. Your surgeon may want you to have nothing to eat or drink for 2-3 hours after an endoscopy, particularly if a narrowing of the pharynx/oesophagus has been dilated. If biopsies have been taken you may cough up a little blood for a few days after surgery. If surgery has been performed on the vocal cords you will be asked to rest your voice for 2 or 3 days. When you start talking again your voice may be more hoarse for a short period before improving.

Usually, you will be able to go home a few hours after the procedure and your surgeon will have seen you to explain what was found and if any biopsies were taken. If biopsies were taken an appointment will be made for you to see the surgeon with the results.

Possible complications

Endoscopy is a safe procedure and complications are very rare. Occasionally, despite protection with a swab or rubber guard, the metal endoscope can chip a tooth. Very rarely, the lining of the throat or oesophagus can be torn causing a leak through the wall. This is more likely to happen if a narrowing in the pharynx or oesophagus has been dilated. If a tear is caused by endoscopy you will be kept in hospital until it heals. You will not be able to have anything to eat or drink until it heals so will be fed using a tube passed through your nose down into your stomach. Alternatively you may receive fluids and nutrition directly into a vein in your arm through a drip. It may take many days for a tear to heal, but fortunately this complication is extremely rare.