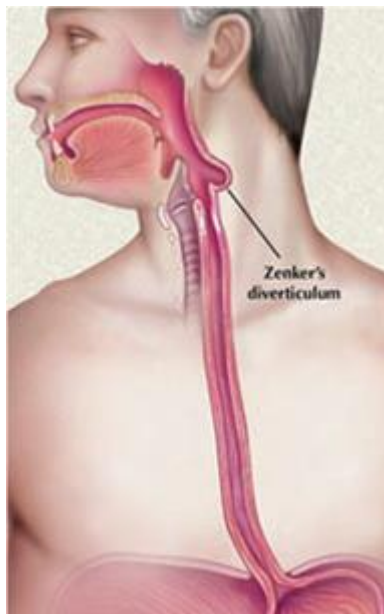


ENDOSCOPIC TREATMENT OF ZENKER'S DIVERTICULECTOMY (PHARYNGEAL POUCH)

Zenker's diverticulum (pharyngeal pouch) is a rare, benign condition that significantly affects patients quality of life because it reduces the ability to swallow food and can lead to coughing episodes that can at times lead to chest infections.

In this condition, a large sac develops in the upper part of the oesophagus (gullet/food pipe). This results because of cricopharyngeal muscle spasm, this muscle exits at the beginning of the gullet. Zenker's diverticulum is mostly found commonly in older patients.



The traditional treatment approaches for this condition consists of an oesophagoscopy with a rigid endoscope usually carried out under a general anaesthetic by an ENT surgeon and this prominent cricopharyngeal muscle is cut with a stapling gun that also automatically applies the sutures at the base.

Certain patients are not suitable for this approach; particularly, those with a smaller pouch and those who are not fit for general anaesthesia.

Endoscopic procedure to Treat Pharyngeal Pouch (Zenker diverticulum)

In the last ten years this Zenker's diverticulum has been treated with a flexible telescope in the gastroscop (flexible telescope) is passed over the tongue, down the throat to identify the pharyngeal sac whilst the bridge of muscle that leads to this sac is identified and it is cut with a very small sophisticated knife. The base of his muscle is clipped with a metal clip to prevent any perforation (hole in the linings of the sac). This treatment has been proven to be effective in over 85% of the cases. It is associated with a shorter hospital stay and reduces the patients discomfort after the procedure. The patients are also able to resume oral food intake after 24 hours after this endoscopic treatment.

Thus the overall benefit of treating Zenker's diverticulum with a flexible telescope is very high. This procedure is carried out with deep sedation with Propofol. Patients are required to be nil by mouth for at least 12 hours before the procedure. Patients are also admitted after the procedure for 24 hours and allowed home if observations are satisfactory.

One shot of antibiotics is sometimes given in selected patients to prevent any infection.

Are there any risks involving having an endoscopic Zenker's diverticulectomy?

This procedure is considered safe even in the largest series but the most serious complication is perforation (hole) at the site of the cut. If this is identified during the procedure, a clip is placed to secure the mucosal breach. In a large series of patients (over 500) treated in this manner and up to 5% of the patients air leaked through the wall of the gullet. If this happens then you will need to stay at the hospital and not eat or drink anything until this has healed. You will then be fed with either a small tube through your nose into your stomach or through a drip into your vein in your arm. You may require antibiotics to prevent infections. As in this procedure, we have to cut the muscle; hence, there is a 2 – 3% risk of bleeding that can be secured with a clip during the procedure.

Video recording of the procedure

Being the only centre in UK we usually record this novel technique that we use in clinical presentations, teaching and publication. Any photo used do not have any identifiable information whatsoever about you. You still be requested the consent form for this on the day.

After the Procedure

You will remain in recovery until effect worn off. Usually we keep patient nil by mouth for 24 hours and allow ice-cream the next day- if tolerated then soft diet for 2-3 days such as yogurt, custard, jelly and scrambled eggs. Normal food is then gradually introduced.

Some patients experience neck pain requiring paracetamol syrup.

If you develop considerable neck pain or breathlessness, we strongly advise you to report to A&E.

When can I go home and after care?

You can usually go home the same day if observation satisfactory. You may be asked to stay for 24 hours if your observations are required. Should a

complication such as a perforation or bleeding occur, then you will need to stay in the hospital for at least 3 – 5 days.

IMPORTANT INFORMATION FOLLOWING ZENKERS DIVERTICULUM

You have attended an elective procedure today. This is a routine procedure, which is often done as a day case and the recovery period is usually uncomplicated.

1. You are advised **NOT TO** eat or drink immediately after your procedure,

You _____ may _____ take _____ sips _____ of
water _____
you _____ may _____ resume _____ oral
fluids _____
you may commence an altered diet _____
build _____ up _____ to _____ soft
diet _____

(as per consultant gastroenterologist instruction)

**IF EATING OR DRINKING CAUSES NECK PAIN OR SHORTNESS OF BREATH
YOU SHOULD SEEK URGENT MEDICAL ADVICE**

2. You may experience a sore throat or hoarseness in your voice, this shouldn't persist.
3. You are advised not to smoke or take alcohol for 24 hours following your procedure.
4. You are advised not to operate a motor vehicle or operate any machinery for 24 hours following your procedure; this includes the use of your kettle or cooker at home.
5. You are advised not to sign any legal documentation or cheques for 24 hours.
6. Avoid heavy lifting or strenuous exercise for at least 48 hours. Rest for the remainder of the day.
7. If you are on blood thinning tablets- advice will be given to you on the day.
8. Small number of patient complains of mild pain during swallowing that can be dealt with paracetamol or ibuprofen syrup.
9. A follow up will be arranged if you are local or Prof Ishaq team will contact you if you are outside the region.
10. Observe for any symptoms such as feeling faint, dizzy, lethargic or generally unwell. Look for signs of bleeding, bruising, swelling or increased redness. Seek advice or assistance if you experience chest pain, back pain, fever or dehydration.
11. Should you have any worries or queries please do not hesitate to contact us on 01384 456111 Ext: 2731 between 8.00am – 6.00pm Monday to Friday. If you have any worries outside this time please contact either your GP / NHS Direct or if feeling very unwell you may choose to attend the Emergency Department.

We value your comments as to our service.

If you would like to contact us with suggestions that can help us to improve our service do not hesitate to contact us either by telephone or a letter.

Endoscopy unit