Treatment of oesophageal varices

Introduction

This leaflet has been written for patients who have been referred for a treatment of oesophageal varices at the hospital.

What are oesophageal varices?

Varices are swollen veins in your oesophagus (gullet), rather like varicose veins, and are formed when blood flow through the liver is compromised. These veins can bleed in which case you may experience vomiting of blood or passage of red, dark plum or even black stool. Bleeding can sometimes be very heavy or even life-threatening. The risk of bleeding can be reduced by shrinking or obliterating the varices with medications or endoscopic therapy.

Endoscopic treatment of oesophageal varices is safe but does have risks. These include:

- Perforation of the gullet
- Infection
- Aspiration of blood or secretions during the procedure which could cause a chest infection
- Complication relating to the sedative drugs that are administered during the procedure.

Treatment of oesophageal varices

The procedure will be carried out under sedation using an intravenous sedative similar to valium. The procedure will be performed during a gastroscopy - please read this leaflet in conjunction with the attached gastroscopy Information leaflet for a more in-depth description of the gastroscopy procedure.

The varices are either treated using 'band ligation' or injection of a 'sclerosant' to scar and dry up the varices. The method used will be decided at the time of the procedure by the endoscopist. The procedure will generally take between 20-30 minutes.
Injection of varices

This procedure can be carried out using an injection needle, which is passed down the channel in the gastroscope whilst it is in your oesophagus (gullet). Through the needle, a drug can be injected into the varices, which creates a clot, blocking them off and causing them to shrink. In order to completely shrink the veins several injections may be needed over the course of several weeks.

Variceal banding (variceal ligation)

This is an alternative method for treating oesophageal varices using a similar technique to the treatment of haemorrhoids (piles) using compression with tight rubber bands. A hollow tube over which small rubber bands have been loaded is attached to the end of the gastroscope. The gastroscope is placed in the oesophagus (gullet), the vein is identified and suction is applied to draw the vein up into the tube. Small elastic bands are then placed over the vein. After a day or two a clot forms in the vein which causes shrinkage. Several treatments, on more than one occasion, may be required to achieve complete shrinkage.

- For this examination to be successful and for the doctor to have a clear view, your stomach must be empty.
- It is important to have nothing to eat or drink for six hours before your test.
- If you have diabetes, please phone the Endoscopy Unit for specific advice.
- If you are taking Warfarin, Clopidogrel, or other blood thinning medications please inform us at least one week before the test.
- Continue to take your other medications with a sip of water.
- Please bring a list of them with you to the unit.
- Expect to be with us for 2-3 hours.

If you have any queries about your medication please call the Endoscopy Unit on 01895 279214
It is important to remember to bring any asthma inhalers or angina sprays with you.
Do not bring valuables to the unit.
Alternatives
Endoscopic treatment of varices is the standard treatment in patients who have already experienced bleeding complications. Other options to reduce the risk of bleeding include oral medications, and an invasive liver procedure called a ‘TIPPS’. Your doctor should discuss all the options with you and explain why endoscopic treatment is the most appropriate in your case.

Going home
Following sedation, it is essential that someone comes to the department to pick you up and then stays with you for the remainder of the day. Once home it is important to rest. Sedation lasts longer than you think, so if you have had sedation you should not do any of the following for 24hrs:
- drive a car
- operate machinery
- drink alcohol
- do not make important decisions or sign important documents.

Over the next few days
A soft diet is recommended for the first 24 hours particularly after banding. The action of the injection or banding will cause the veins to ulcerate over the next few days before healing. This can cause some soreness on swallowing for a few days. It is possible for a stricture (narrowing) to form in the oesophagus (gullet). This is more likely if the varices are large and repeated treatments (especially injection treatments) have been required. This may make swallowing difficult but can be treated. You may need to have a further procedure to ensure that varices have been completely eradicated.

Who can I contact if I have any questions or problems?
If you have any concerns or problems please contact the Endoscopy Unit:
Open between 0830 am – 5pm Monday to Friday Tel: 01895 279214

Who to contact out of hours
If you develop any urgent problems following your discharge and you feel that they cannot wait until the Endoscopy Unit is next open, please contact your GP/NHS Direct or A&E who will advise you.
Languages/alternative formats

Please ask if you require this information in other languages, large print or audio format. Please contact: 01895 279973

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Jeżeli chciałbyś uzyskać te informacje w innym języku, w dużej czcionce lub w formacie audio, poprosź pracownika oddziału o kontakt z biurem informacji pacjenta (patient information) pod numerem telefonu: 01895 279973.

如果你需要這些資料的其他語言版本、大字体、或音頻格式，請致電01895 279 973查詢。

إذا كنت تود الحصول على هذه المعلومات بلغة أخرى، بالأحرف الكبيرة أو بشكل شريط صوتي، يرجى الاتصال بالرقم التالي 01895279973.