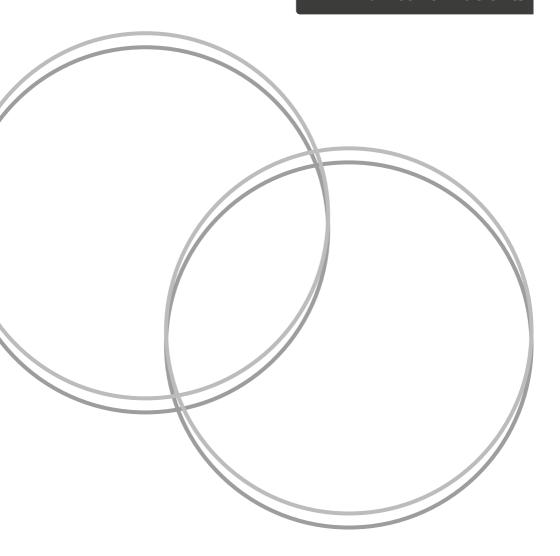
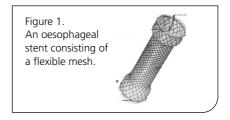


Oesophageal Stent Insertion

Information and Dietary
Advice for Patients



This leaflet describes what an oesophageal stent is, how it works, and provides dietary information and helpful tips for patients who have had an oesophageal stent.



What is an oesophageal stent?

An oesophageal stent is a flexible mesh tube, approximately 2cm wide, which is placed in your oesophagus (food pipe) to help you to swallow and to allow food to pass through into your stomach for digestion and absorption of nutrients.

The stent gradually expands over a few days to hold the narrowed area open. The stent is not as wide or flexible as a normal oesophagus, so you will need to take care in eating certain foods to prevent the stent from blocking.

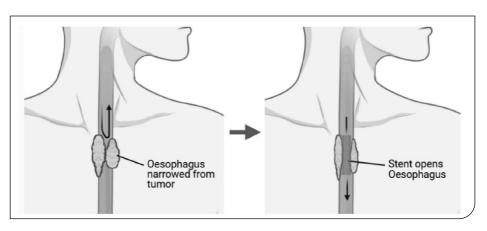


Figure 2. Figure showing how the oesophageal stent expands in the oesophagus. (Image Credit from Jackson et al, Journal of Materials Science 2022.)

Why do I need an oesophageal stent?

You would have had several investigations, such as an endoscopy (camera test) or a barium swallow (X-ray of the oesophagus), which will have shown that your oesophagus has become blocked or narrowed.

Your doctor or Specialist Nurse will explain to you what the cause of the blockage is likely to be, and the most appropriate treatment options for you. You should have the opportunity to discuss these options with them. This may help you decide if you wish to have a stent insertion to aid in your swallowing. If you are still unsure, please speak to the specialist nurse and ask for more information.

How can I prepare for the procedure and what does the procedure involve?

Oesophageal stents are effective in helping patients return to a more normal diet. The procedure itself is quick and straightforward.

You will be admitted to hospital either the day before or on the same morning as the procedure.

Most people can continue their usual medication. If you are a diabetic who takes insulin, or if you take blood-thinning medication or anticoagulants (eg. apixaban/dabigatran/warfarin), please contact the specialist nurse or doctor before coming into hospital.

Please bring all your medications with you. Please also follow these instructions unless directed otherwise.

Eating – Do not eat or drink (nil-by-mouth (NBM) for 4 hours before the procedure.

What does the procedure involve?

You will be taken to the X-ray Department and have a cannula inserted into the back of your hand, so that the radiologist can give a sedative and painkillers to perform the procedure. You will have an oxygen-monitoring device attached to your finger and you will receive oxygen through a small tube placed in your nostrils.

The back of your throat will be sprayed with local anaesthetic to make the procedure more comfortable. He/she will then inject the sedative into the cannula. You will be very drowsy but not fully asleep.

A fine tube is passed through your mouth, down your oesophagus and through the blockage/narrowing. The stent is then passed over this tube and into the correct position across the blockage. The fine tube is then withdrawn. The procedure itself takes 10 to 15 minutes, and you would expect to be in Radiology approximately 45 minutes to 1.5 hours.

When can I start eating after an oesophageal stent?

After a stent insertion, you will usually be placed nil by mouth (NBM) for 2 hours. Once the sedation wears off, you will be allowed to start taking fluids orally. It is recommended to stick to fluids for the first 6 hours after the procedure, then build up gradually to a soft diet.

What can I eat?

Stage 1. Day of stent insertion.	 Fluids only – water, diluted squash, tea, coffee, smooth soups with no bits e.g. Cream of tomato or cream of chicken, Milky drinks or nutritional supplements if you have these. Start with small sips and build up the quantity as you feel confident. 	
Stage 2. Day 1 after stent insertion.	• Smooth, sloppy or pureed foods, such as soups (with no lumps), yoghurt, ice cream, custard, jelly for breakfast.	
Stage 3. Day 2 after stent insertion.	 Start to introduce foods with a soft, moist consistency into your diet, as you feel your swallowing becomes easier and your confidence builds, e.g. steamed fish, mashed potato, mashed banana and custard. Try to include a wide variety of foods and fluids in your diet so that you get back to as near a balanced diet as possible. 	

Before leaving hospital, you will be visited by our Specialist Dietitians who will advise you on the type of foods you should be eating and what food to avoid. Once the doctors, nurses and dietitians are satisfied that you are eating and drinking comfortably again (may be 1 to 2 days after stent insertion), you should be able to go home.

Helpful tips to help you with eating

- Take your time, relax and eat your meals slowly at your own pace.
- Try to eat little and often aim for five or six small meals rather than three big meals.
- Sit upright at mealtimes, and for half an hour after, as this will help your food to go down.
- Cut your food into small pieces.
- Chew your food well before swallowing. Do not swallow big chunks of food as they can block the stent.
- Do not be afraid to spit out lumps that cannot be chewed.
- Have plenty of sauces, gravy, custard or cream with meals, as this will make your food moist and easier to swallow and pass through your stent.
- Take drinks during and after each meal, as they help to keep your tube clear. All fluids are beneficial, for some people fizzy drinks may worsen heartburn or acid reflux.
- Introduce new foods gradually, beginning with small amounts
- If you wear dentures, make sure they fit correctly.
- If you take large tablets, you may be able to crush them or to request to have them in liquid form. Please check with your pharmacist or GP first. Take tablets with plenty of water.

What if food gets stuck?

Do not panic.

Stop eating, stand up and take a few sips of a warm or fizzy drink and walk about until you feel it clear.

If it has not cleared after 1 to 2 hours, contact your Oncology Triage or our Specialist Nurses. If it is out of working hours, you may access advice from NHS direct or your local A&E department.

How can I avoid losing too much weight?

If you have lost weight or have a poor appetite, try the following:

- Try nourishing drinks between your meals and at bedtime e.g Milk, Horlicks, Ovaltine, hot chocolate, or make your own fruit smooth or milkshake using ice cream, yoghurt and fortified milk.
- Add extra cheese, butter, milk, and cream where possible to cereals, puddings and drinks.
- Choose full cream milk and full fat foods instead of low fat products.
- Eat little and often, including small snacks.
- Have snacks between meals.
- Try using full fat milk through the day on cereal, and in milky drinks. Milk-based puddings and desserts (homemade or bought) can be helpful.
- Fortify milk by adding 2 to 4 tablespoons dried milk powder to 1 pint of milk. Use this for drinks, soups, puddings and sauces.
- If you are concerned about any weight loss, you will need further dietitian input, a referral of which can be made by your doctors or Specialist Nurse.

What are the potential problems that is associated with my stent?

Discomfort	As the stent expands, it can cause some discomfort in the chest area, which normally improves after 72 hours. You will be discharged with medications such as liquid Paracetamol and sometimes liquid morphine, which will help relieve the discomfort.
Swallowing problems	 If your ability to swallow does not improve despite following the advice in this information leaflet, it may be because the stent is not in the correct position or it has migrated. You need to contact your doctor, Specialist Nurse or Specialist Dietitian for advice. You should also seek advice if swallowing food and drink causes you to cough, or if you experience any breathing difficulties.
Acid reflux	 Sit upright to eat. Try not to bend down or lie down for one hour after eating. Avoid tight fitting belts or clothing. Try to sleep in a semi-upright position using extra pillows. Try not to eat too late at night and leave at least an hour before going to bed. You will be discharged with antiacid medication to help relieve heartburn.

What are some suitable foods or meal ideas?

Food type	Most easily managed	Try to avoid
Meat/Meat substitutes	Minced or tender cuts of meat with gravy or a sauceQuorn or soya minceTofu	Tough stringy chunks of meatFat gristly meat
Fish	 Poached, boiled or steamed fish with a sauce e.g white sauce or parsley. Fish mousse, pâté, taramasalata, fish roe Chopped shellfish (no shell) with mayonnaise e.g dressed crab or prawn cocktail 	 Fish with bones e.g mackerel Dry fish Prawns with shells on
Nuts and Seeds	 Ground nuts added to foods e.g ground almonds added to runny Ready Brek/runny porridge Smooth nut butters 	Chopped, flaked or whole nutsChunky nut butters
Eggs	ScrambledPoachedOmeletteSoufflésEgg Custard	Hard boiledFried egg white
Bread/Potatoes/ Starchy Foods	 Croissants Mashed or boiled potatoes with added butter and milk or cream Tinned spaghetti or spaghetti hoops Soft crackers Well cooked rice Pasta served with sauce 	 Bread All potato skins Crispy chips Roast potatoes Crispbreads Rice cakes, Sticky rice Hard pastry

Food type	Most easily managed	Try to avoid
Cheese	 Grated cheese Cottage cheese Cream cheese/cheese spreads Cheese sauce	 Stringy melted cheeses Any cheeses which contain dried fruits or nuts Chunks of cheese Halloumi
Cereals	 Use plenty of milk to ensure cereals are soft Porridge and oat based cereals Weetabix and oatibix All other cereals which do not contain dried fruit and nuts 	 Cereals with nuts and dried fruit e.g muesli Coarse cereals e.g shredded wheat
Vegetables	 Soft, well cooked vegetables Vegetables in stews or curries Guacamole 	 Raw vegetables e.g salad Stringy vegetables e.g celery, runner beans, okra, aubergine Vegetables with tough or coarse skins/husks e.g sweetcorn
Fruit	 Soft fruit, peeled Tinned fruit Stewed fruit Smooth fruit juice Fruit smoothie 	 Fruit skins Pithy or stringy fruit e.g oranges, pineapple Dried fruit
Beans and pulses	 Well-cooked Baked beans Lentils well cooked in soups and stews e.g lentil soup, dahl Smooth hummus 	Ensure well cooked and use tinned versions of other beans

Food type	Most easily managed	Try to avoid
Puddings	 Sponge (no dried fruit or nuts) served with custard Trifle, angel delight, mousse Chocolate Milky puddings: rice pudding, semolina, custard Yoghurt/fromage frais/Yoghurt drinks Ice cream Fruit crumble Tiramisu Sorbet Meringues 	Any cakes, biscuits or yoghurts with dried fruit and nuts
Snacks	 Crisps which melt in the mouth e.g quavers, wotsits, skips Tzatziki or soured cream dips Plain biscuits dipped in hot drinks Prawn crackers 	Hard crispsChutneys with bits in eg. Red onion chutney

If you have any questions about eating with your stent, please contact your Specialist Dietitian.

Contact numbers

Please leave a message on the answerphone and we will get back to you as soon as possible.

Upper Gastrointestinal Specialist Nurses

Telephone: **01865 235 058** (Monday to Friday, 8am to 5pm)

Upper Gastrointestinal Specialist Dietitians

Telephone: **01865 228 305** (Monday to Friday, 9am to 4pm)

Acute Oncology Triage, Churchill Hospital

Telephone: 01865 572 192 (Monday to Friday 8am to 8pm,

Saturday to Sunday, 8am to 6pm)

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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