

Information About Your Child's Procedure

Esophageal Dilatation

Read this form so you understand the procedure and its risks. Please ask questions about anything you do not understand.

What is esophageal dilatation?

The esophagus is the tube that carries food and liquid from the mouth to the stomach. If it becomes too narrow, swallowing food or liquid may be difficult. Esophageal dilatation (also called dilation) is a technique used to stretch or open portions of the esophagus that are too narrow.

There are different causes of esophageal strictures (narrowing), including allergies and injury. Your primary physician is responsible for finding out what is causing the problem. He or she will refer you to the interventional radiologist, who will perform the dilatation.

How is esophageal dilatation performed?

Using live X-ray (fluoroscopy) for guidance, a doctor places a flexible wire into the mouth and down the esophagus, past the narrowed area. Then a deflated balloon is threaded over the wire and inflated into a sausage shape to stretch and enlarge the narrowed area. Sometimes more than one balloon will be used. Your child will be protected by an X-ray shield during this procedure.

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Will my child be awake for the procedure?

No. All children are given general anesthesia for the procedure.

What are the risks of esophageal dilatation?

The procedure is considered low-risk. However, potential complications include:

- esophageal tear
- bleeding at the treatment site (coughing or throwing up blood)
- mediastinitis (severe inflammation of tissue in the chest area)

Will my child have pain after the procedure?

Some children experience chest pain or pain with swallowing in the first 24 hours after the procedure. You may give over-the-counter pain medication.

What are the diet restrictions after the procedure?

- No food or drink for four hours after the procedure.
- After four hours, try clear liquids such as water, broth or ginger ale. If your child can drink the liquids without pain, you may offer him or her soft foods such as mashed potatoes and pudding, as tolerated.
- Stay on a soft diet for at least 24 hours.
- No hot food for at least 24 hours; food may be lukewarm.
- No “sharp” foods such as cookies, chips or crackers for at least 24 hours.
- Transition to a regular diet after 24 hours, as long as swallowing the foods isn’t painful.

CONTACT US IMMEDIATELY IF YOUR CHILD EXPERIENCES ANY OF THE FOLLOWING:

- fever higher than 101° Fahrenheit
- chest pain that doesn’t improve with pain medication
- inability to swallow liquids
- throwing up blood or coughing up blood

Call Interventional Radiology between 8 a.m. and 4:30 p.m., Monday through Friday, at 215-590-7000. At the first prompt push 1 and at the second prompt push 2.

At all other times, call 215-590-1000 and ask to speak to the interventional radiologist on call.

The Interventional Radiology team is here to help you and your child. Please ask us if you have any questions or if anything is not clear.

Thank you!

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