

Oesophageal manometry and 24-hour pH measurement study

This information sheet provides essential information to prepare you for your forthcoming procedure. You have been advised to have an **oesophageal manometry and 24hr pH monitoring** to help find the cause of your symptoms. This sheet covers frequently asked questions for the two tests which are performed separately, but on the same day.

What is oesophageal manometry and 24hr pH monitoring?

High resolution oesophageal manometry (HRM) is a test that measures the pressure within the oesophagus (gullet). A thin catheter (tube) is gently passed via your nose into the oesophagus. This tube has sensors along its length and allows an assessment of how well the muscles in the oesophagus are working and whether contractions within the oesophagus are coordinated. It takes 20 minutes to perform the HRM test, and the tube is removed when the test is complete.

A second test is then performed. This uses a thinner catheter passed via the nose to measure the amount of acid coming up (refluxing) into the oesophagus from the stomach over a 24-hour period. This allows us to establish whether your symptoms are due to acid reflux and how severe the problem is. This test requires you to go home with a tube secured to your nose for 24 hours. The tube is connected to a small recording box. You will then return the next day and we remove the tube.

What are the benefits of these tests?

The tests provide valuable information regarding your condition and will help to decide what the best treatment is for you (practical advice, medication or surgery). Unfortunately, there are no other less invasive tests available that will give us this information.

What are the risks involved with these tests?

The risk of causing serious harm to you with this test is very rare. Minor side effects of oesophageal manometry could include a runny nose or nosebleed. This can be caused by the tube that irritates or inflames the nasal tissue and you may feel minor discomfort in your throat. These issues usually disappear on the removal of the tube. Occasionally, during insertion, the tube may enter the larynx (voice box) and cause a temporary choking feeling. When this happens, the tube is rapidly removed.

Preparation

- **Do not** have anything to eat or drink for **4 hours** prior to the monitoring, although you may drink only water up to **2 hours** prior to the test.
- Please **do not** wear any make up or moisturiser on your face on the day of testing, as this prevents the tape securing the tube to your face.
- If you are on any medication for your heart, breathing problems or hormone replacement therapy, please continue to take them as usual.

However, it is important that you **stop taking any of the medications below** before the test. You can take Gaviscon **but do not take it on the day** of your procedure.

Proton Pump Inhibitors – stop 7 days prior to the tests:

- Omeprazole
- Lansoprazole
- Rabeprazole
- Esomeprazole
- Pantoprazole

H2 Antagonists – stop 3 days prior to the tests:

- Nizatidine
- Domperidone
- Mebevirine
- Buscopan
- Famotidine
- Metoclopramide
- Alverine Citrate
- Baclofen

Admission to the Endoscopy Unit

The procedure will take place in the Endoscopy Unit at the New QEII Hospital. A member of staff will meet and greet you. They will then escort you to the procedure room and explain the procedure to you. This is to ensure that you understand the test and all its implications. You will be asked to sign a consent form if you agree to have the procedures carried out.

What happens during the procedure?

You will be asked to sit upright on a couch:

- A catheter (tube) with pressure sensors will be passed via your nose into your stomach. This will involve drinking water to ease the passage of the tube. Once the tube is in position it is secured in place with a tape to your nose.
- The procedure will then begin and we will then give you small measured (5ml) sips of water to swallow approximately ten times.
- Following this we will ask you to drink sips of water freely and then ask you to eat a non-gelatine (vegan) marshmallow.
- Once this is completed, we will have the information to place the overnight 24-hour pH catheter (tube). The pressure sensor tube is then removed and replaced by the much thinner 24-hour pH tube which is much more comfortable. This tube will stay in place for 24 hours. This new pH tube will be attached to a recording device (slightly bigger than a smart phone).
- Following insertion of the pH tube a member of staff will explain how to use the monitoring equipment during the recording period and give you instructions for returning the next day.
- The process of placing both tubes takes about 45 minutes, after which time you will be able to return to work/home.

It is important that you carry out your normal activities as much as possible during the 24-hour recording period to see if they might be related to your symptoms. You should not shower or take a bath as it could result in damaging the monitoring equipment.

You cannot take your normal anti-reflux or indigestion medication during this 24-hour period as it will prevent accurate monitoring results. Nor should you be taking any antacid medication that was permitted in the previous week, even if you have symptoms during this 24-hour recording. If you ignore the advice and take any anti-reflux or indigestion medication during this period, you will be required to have the 24-hour pH test repeated.

Please be aware that you will be required to return to the department the following day to have the pH tube removed. We will remove both the pH tube and the recording equipment from you. We would expect you to be in the department no longer than 15 minutes before you are free to go home or to work.

If further advice is required, you can phone the Endoscopy Unit on 01438 286430 (Monday to Friday, 8am - 6pm). Out of hours, ring 111.

What happens afterwards?

The results of the test will be analysed before a diagnosis can be made. Once this is done the report will be sent to the consultant in charge of your care. They will decide what the most appropriate treatment is for you. You should expect to hear from the hospital within 4 weeks of having the test.

Please tick the checklist below to ensure you have read all the information and are ready for your procedure:

- | | |
|---|--------------------------|
| I have read this patient information sheet | <input type="checkbox"/> |
| I have understood the information provided | <input type="checkbox"/> |
| I have read the consent form (if given/sent one) | <input type="checkbox"/> |
| I am aware of when I should stop eating and drinking | <input type="checkbox"/> |
| I have contacted the diabetes nurse (if required) | <input type="checkbox"/> |
| I have contacted the anticoagulant clinic (if required) | <input type="checkbox"/> |
| I have contacted the nurses with any queries | <input type="checkbox"/> |

If you are unsure about anything, please contact us.

Your procedure could be cancelled if you have not followed the instructions properly.

Additional information

To view the Lister and New QEII site maps for navigating your way around our hospitals, please visit our Trust website - www.enherts-tr.nhs.uk

Useful contact details

East and North Hertfordshire NHS Trust:

- Website www.enherts-tr.nhs.uk
- Telephone 01438 314333

Endoscopy Unit - Lister and New QEII:

- Lister: Telephone 01438 288603 - Option 1
- New QEII: Telephone 01707 247728

Nurses' Enquiry Line

- Telephone 01438 288603 (please ring between 8am - 10am and 4pm - 6pm) - Option 2

Diabetic Specialist Nurses

- Telephone 01438 284560
- Telephone 01438 284645
- Telephone 01438 284615

This is not an emergency service. Messages left on the answerphone may not be answered for 24-48hrs.



Leaflet information

You can request this information in a different format or another language; please speak to your doctor or nurse.

Date of publication: September 2024

Version number: 2

Author: K Shaw/Dr J Evans

Reference: Endoscopy

Review Date: September 2027

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