



Oesophageal stent: a guide for patients

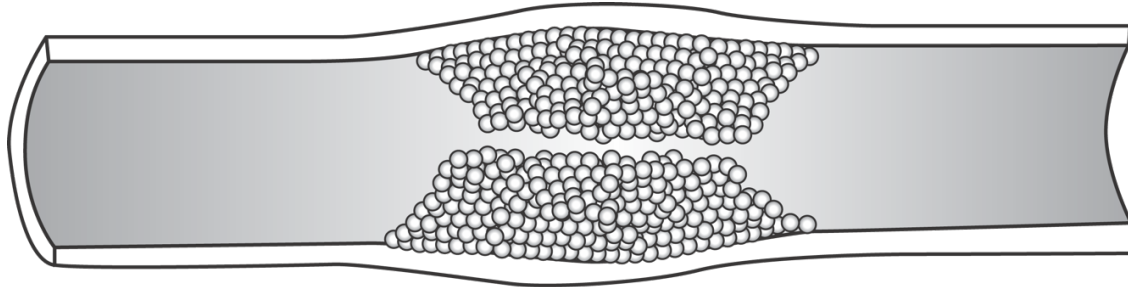
You have been advised to have a flexible metal tube inserted into your oesophagus (gullet). This is called an oesophageal stent. The aim of the stent is to improve your swallowing and allow you to drink and/or eat better than you have been able to recently, but you will need to make changes to your usual diet.

Why do I need a stent?

You have been diagnosed with a cancer of the gullet and/or upper stomach. The cancer is causing a narrowing (stricture) or blockage to the gullet or upper stomach, preventing fluid and/or food passing into your stomach. Inserting a stent through the stricture may improve swallowing and allow you to eat and drink.

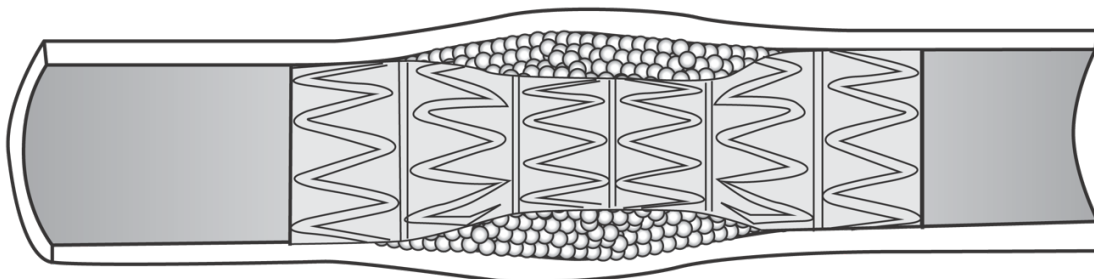
As with any procedure there are risks and you will be able to discuss these with the doctor carrying out the procedure. Other alternatives will be discussed with yourself, your doctor and clinical nurse specialist.

What is an oesophageal stent?



Narrowing in the oesophagus (stricture) due to cancer

An oesophageal stent is a flexible (bendy) tube placed in the gullet to keep a blocked area in the gullet open so the patient can swallow soft food and liquids. Oesophageal stents are made of a non-dissolvable material and come in different sizes. They are held in place by the tumour and the muscles in the wall of the gullet.



Stent in place

What happens following the procedure once your stent is fitted?

You may feel some pain/discomfort in your gullet after the procedure and for the next few days. This is because it takes up to 48 hours for the tube to expand fully. This is quite common, so we recommend that you take painkillers that dissolve in water until this discomfort goes away. After you have had a stent inserted you will not be able to eat or drink for 4 hours afterwards. You will then be able to drink for the rest of the day. You must not eat until 24 hours after the stent has been inserted.

Once the stent has expanded to its full size, it will stay fully open and will allow food to fall down without touching the sides of your oesophagus. You need to be aware that if you eat large lumps of hard food or poorly chewed food the stent does not push the food through like the oesophagus muscles would normally do and the stent becomes blocked. You may also find that you suffer with heartburn following the stent insertion causing acid reflux from the stomach because the gullet is kept open by the stent. This can be controlled by anti-acid drugs and if you are not already on a special anti-acid tablet called Omeprazole or Lansoprazole, please discuss this with your doctor, dietitian or clinical nurse specialist for more information.

What symptoms should I look out for when I am at home?

If in the three days following the procedure you experience any of the following symptoms, you should return to the Accident and Emergency department immediately:

- Difficulty breathing
- Severe chest pain
- Vomiting
- Vomiting blood

If you are too unwell to make your own way to the hospital, call an ambulance. However, these problems are very rare. Please talk to the doctor if you want to discuss these further.

Swallowing difficulty

If you cannot swallow foods or fluids, your stent may be blocked. Try a fizzy or warm drink and walk around. If this does not work or you are not able to swallow after a couple of hours, then contact the Endoscopy Department or your Clinical Nurse Specialist. If the department is closed, contact your GP who will advise you. If you have any further questions about your stent, please contact your Clinical Nurse Specialist.

Eating and drinking

There are some important facts you need to know about caring for your stent:

- Always eat sitting upright to aid digestion and try to maintain upright for at least half an hour after eating to prevent indigestion
- It is important to eat slowly
- Chew your food well and if you wear dentures, ensure they fit properly
- We recommend that you begin with pureed foods (smooth, single texture, no lumps) and gradually build up to more solid foods
- Frequent drinks can help to keep the stent clear by loosening any food products that may have stuck against the walls

Hints and tips

- Spit out anything you have been unable to chew properly
- It is important to eat a healthy, balanced diet when possible
- If your appetite is poor, a small amount of alcohol prior to meals may stimulate appetite

- Don't stick to rigid mealtimes; eat when you are hungry. Eat small amounts and often
- If you feel too tired to eat, let others cook for you, try meals on wheels or frozen meals for a while. Prepare foods when you are well and freeze them or convenience foods may be useful. You may find it easier to eat after a nap
- Don't eat within an hour of bedtime
- Prop yourself up in bed with extra pillows at night to reduce acid reflux
- Avoid the foods in the following table which may block your stent

What can I eat following my stent insertion?

The following table provides information on foods you should avoid and suitable alternatives. This list is a guide, if you have any questions about other foods, please ask your dietitian or clinical nurse specialist.

Food	Foods to avoid Certain foods may block the stent. These include:	Suitable alternatives
Fruit	• Pineapple • Fruit skins and the pith or grapefruit, orange	• Soft, peeled fruits • Stewed/tinned fruits • Fruit juice
Vegetables	Green salads and raw vegetables Stringy vegetables like green beans, onion, celery Okra	Soft, well cooked Vegetables Mash or puree if required
Eggs	• Fried egg whites and hard-boiled eggs	• Poached, scrambled, soft boiled, soufflé, omelette
Meat	• Tough meat and gristle • Large chunks of meat • Dry meat	• Soft, tender meat • Stewed meat • Meat with sauce • Minced meat • Dahl
Fish	• Fish with bones	• Boneless fish • Poached, steamed, boil-in-the-bag fish
Breads and cereals	• White bread and toasts • Chapatti	• Thinly sliced brown bread
Potatoes and starchy carbohydrates	• Chips • Crisps • Yams • Plantain • Green bananas	• Mashed potato, jacket potato without the skin • Soft, cooked pasta and rice • Tinned spaghetti
Desserts	• Dry cakes and biscuits • Popcorn	• Jelly • Ice cream • Custard • Biscuits dipped in drinks

Weight loss

Energy in food is called calories. It can be difficult to get all the calories you need from your diet if you have a small appetite. Foods that you previously thought of as being 'unhealthy' for you (such as full cream milk, butter, biscuits and cakes) are now 'good' for you. This is because these foods contain lots of calories in a small amount. Choose foods that are high in calories and avoid foods that contain 'low fat', 'diet' or 'low sugar'. Unless you are diabetic and you have high blood sugars then 'low sugar' options should be chosen. You can also add extra calories to the foods you are currently eating. This will help stop weight loss and may even make you gain weight. Ways of doing this are listed in the table below.

Nutritional supplements may also be available to you on prescription from your GP. These drinks and puddings can provide additional calories and protein when you are not eating and drinking enough.

If you are concerned about weight loss; contact your clinical nurse specialist for advice and support. They may refer you to a dietitian who will advise you on an appropriate diet.

The table below lists recommended foods which will help to increase your energy and protein intake:

Food item	What can I add it to?
Full fat milk	Tea/coffee, hot chocolate, breakfast cereals, i.e. smooth porridge oats / soggy cornflakes or rice Krispies, mashed potato, custard, fruit smoothies
Milk powder	Tea/coffee, hot chocolate, soups, breakfast cereals. Make fortified milk by adding 4 tablespoons to 1-pint full fat milk
Butter	Boiled potatoes, mashed potatoes, omelette, curry, soups, stews, scrambled eggs
Cream	Coffee, hot chocolate, desserts, mashed potatoes, sauces, cakes. Coconut cream can be added to curries
Cheese	Cottage/shepherd's pie, mashed potatoes, sauces, omelette, pasta dishes, cauliflower
Honey	Breakfast cereals, herbal tea, cakes, yoghurts
Sugar	Tea/coffee, hot chocolate, breakfast cereals, desserts, cakes
Ice cream	Desserts, fruit smoothies, homemade milkshakes
Jam	Rice pudding, custard, smooth porridge, cakes

Contacts

If you have any further questions about the information in this leaflet, please contact your clinical nurse specialist or Dietitian at QEHB on 0121 371 3485.

This guide is provided for general information only and is not a substitute for professional medical advice. Every effort is taken to ensure that this information is accurate and consistent with current knowledge and practice at the time of publication. We are constantly striving to improve the quality of our information.

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