

Endoscopy department

Understanding oesophageal manometry and 24-hour pH monitoring

Information for patients, relatives and carers

Name:

Hospital number:

Your appointment is on:

At: St. Mary's Hospital Endoscopy Department

If you have any questions or concerns about your appointment or regular medication, please do not hesitate to contact the patient service centre on **020 3312 6010**.

Introduction

This leaflet has been designed to help answer some of the questions you may have about your appointment and to help you prepare for an **oesophageal manometry or a 24-hour pH monitoring test, or both**.

You will have the test or tests that have been requested by your doctor.

Please read this leaflet at least one week before your appointment and follow the instructions carefully.

If you do not attend your appointment, we will refer you back to the healthcare professional who requested this investigation for you.

What is oesophageal manometry?

The oesophagus (gullet) is a long muscular tube that carries food from the mouth to the stomach.

Oesophageal manometry is a test which is used to measure contractions of muscle along the oesophagus and in the sphincters (bands of muscle) at the top and bottom of it.

The sphincters control entry of food into the oesophagus and from the oesophagus into the stomach.

Your doctor may have referred you for oesophageal manometry if you have difficulties swallowing, for diagnosis of the cause of chest pain, persistent coughing or if you have symptoms of reflux (heartburn), which is not controlled by medication.

What is pH monitoring?

The stomach contains lots of acid, which is essential for the digestion of food. If the acid escapes into the oesophagus, it irritates the lining of the tube and causes a sensation of burning (heartburn). This process is known as 'reflux' and most people experience it from time to time. However, if it occurs over a long period of time, it can cause damage to the lining of the oesophagus and lead to complications.

Reflux that is so frequent or severe that it causes damage is called 'gastroesophageal reflux disease' or 'GORD/GERD'. Severe reflux can also cause respiratory problems such as asthma or persistent coughing.

We can assess the severity of reflux by measuring the acid concentration (pH) in the lower part of the oesophagus over 24 hours.

What are the risks and benefits of having oesophageal manometry and pH monitoring?

Complications arising from these tests are very rare. The tube may be inserted into the trachea (windpipe) by mistake, but this will be immediately rectified by withdrawing it. Perforation is also a possibility but extremely rare.

The majority of patients do not experience any side effects. However, some patients do find their throat a bit sore for a few hours afterwards. If you suffer from sinusitis the procedure may induce a flare up.

Is there anything I should do to prepare for my appointment?

You should **stop taking** the following medications for **one week** before your test:

- **Omeprazole (Losec®)**
- **Lansoprazole (Zoton®)**
- **Esomeprazole (Nexium®)**
- **Rabeprazole (Pariet®)**
- **Pantoprazole (Protium®)**

You should **stop taking** the following medications **48 hours** before your test:

- **Ranitidine (Zantac®)**
- **Cimetidine (Tagamet®)**
- **Gaviscon®**
- **Metoclopramide (Maxolon®)**
- **Cisapride (Prepulsid®)**
- **Domperidone**
- **Famotidine (Pepcid®)**
- **Nizatidine (Axid®)**

If you take blood-thinning medications (such as **warfarin** or **aspirin**) or are allergic to any medications, or both, please contact your own doctor or GP for advice before your appointment.

You **can take** your other regular morning medications **before 7am** with a small sip of water, if necessary, unless you have been advised otherwise.

You should **NOT** have anything to eat or drink **6 hours** before your appointment.

What happens on the day of my appointment?

The procedure will be discussed with you in detail and you will be asked to sign a consent form. This is to make sure that you understand the risks and benefits of having the test.

Oesophageal manometry is used to measure the contractions of the muscles in your oesophagus.

We will pass a catheter (flexible plastic tube) through your nostril and down into your stomach. We will then ask you to swallow a small amount of water at regular intervals. This will take 10 to 20 minutes.

During the **pH monitoring test**, we will pass a small plastic catheter (tube) with a pH monitor on the end down through your nostril so that it lies 5cm above the opening to the stomach.

The end of the tube will stick out of your nostril and be safely taped out of the way to the side of your cheek. Fitting the tube takes about 10 minutes and you will be able to go home afterwards.

The tube is connected to a data recorder, which is worn on a belt and connected to the tube by thin wires. This will keep a record of the pH levels over the next 18 to 24 hours.

We will ask you to come back the following day to return the data recorder and to have the tube removed. This will only take about 5 to 10 minutes and is a painless procedure.

During the 24-hour study you will be able to follow your normal diet and daily routine, however **do not eat or drink** the following:

- chocolate
- acidic drinks like fruit juices
- fizzy drinks
- alcohol
- coffee
- sucking sweets or chewing gum

You can drink as much tea, milk and water as you like. You will be provided with a patient diary to record information on when you eat or drink and when you lay down to rest.

It will not be possible for you to have a shower during the 24-hour period. Instead, please use a flannel to wash. You can have a bath, although you must be very careful not to wet the equipment. A member of staff will provide you with further guidance.

The procedure/s will take approximately one hour. You will not be sedated and can therefore resume your normal activities after the test. You will be fit to drive.

You will need to return with the recorder the following day for removal.

Are there symptoms I need to watch out for at home?

No. You may have a slightly sore throat for the next 24 hours, but this is normal and will quickly get better.

How do I get to the hospital?

You are advised to travel, if possible, by public transport. Car parking is severely limited and you may find it very difficult to find a place to park near the hospital.

The nearest tube stations to St Mary's Hospital are:

- Paddington – Bakerloo, Circle, Districtm and Hammersmith & City lines
- Edgware Road – Bakerloo, Circle, and District lines

Buses that stop on Praed Street near the hospital are numbers 7, 15, 23, 36 and 436.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please

either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3312 7777** St Mary's Hospital.

You can also email PALS at **imperial.pals@nhs.net** The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf. Alternatively, you may wish to complain by contacting our complaints department:

Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street, London W2 1NY

Email: **ICHC-tr.Complaints@nhs.net**

Telephone: **020 3312 1337 / 1349**

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team: imperial.patient.information@nhs.net

Wi-Fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

Endoscopy department
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