IHNS THE IRISH HEAD & NECK SOCIETY

THE JOURNAL OF THE IRISH HEAD AND NECK SOCIETY

Title: Single institution experience with efficacy and safety of in-office transnasal oesophagoscopy (TNO) and balloon dilatation

Body: Background: The primary objective of this study was to assess the efficacy and safety of in-office transnasal oesophagoscopy (TNO) and balloon dilatation for patients presenting with symptoms of high dysphagia. The secondary objective was to conduct a subgroup analysis to better understand patient selection.

Methods: Retrospective observational study.

Results: 204 TNO and balloon dilatations were performed for 146 patients (median age 73). Indications included cricopharyngeal hypertrophy±pouch(n=70), hypopharyngeal/upper oesophageal web/stenosis(n=18), head and neck cancer treatment-related(n=41), multi-level obstruction(n=13), and symptom-based(n=4). The mean EAT-10 score improved from 21.2(SD±8.92) pre-dilatation to 12.6(SD±10.7) post-dilatation overall (median follow-up 4.4 months; range 1.5 months–6.21 years). Cricopharyngeal hypertrophy and/or web without dysmotility cohort responded the best with the mean EAT-10 score improvement from 20.4(SD±8.21) to 4.4(SD±6.71). Head and neck cancer patient group showed three types of responses: good response; initial good response however stops responding over time; and no response. The overall complication rate was 0.98%(n=2/204) with 0% perforation rate.

Conclusion: TNO and balloon dilatation is a safe and effective treatment for high dysphagia in patients with identifiable non-malignant obstructive pathologies at and around the level of the upper oesophageal sphincter, including head and neck tretament-related patients.

Authors: Natalija Snovak[1], Chang Woo Lee[1], Virginia Ludwig[1], Kate J. Heathcote[1]

Affiliations: 1. Department of Otolaryngology-Head and Neck Surgery, University Hospitals Dorset NHS Foundation Trust, Poole, UK