



MARYLAND ENT ASSOCIATES

EAR • NOSE • THROAT

FACIAL PLASTIC SURGERY

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## TRANSNASAL ESOPHAGOSCOPY (TNE)

A transnasal esophagoscopy (TNE) is a thin, flexible endoscope that is inserted through the nose and down the throat in order to gain view of the vocal folds, larynx (voicebox), esophagus, or other structures of the throat. Patients do not need to be sedated before undergoing TNE. A topical anesthetic is sprayed into the nose and also in the back of the throat. Sometimes a large cotton ball with an anesthetic medicine is placed in the nasal passage for a few moments to ensure adequate anesthesia. Because intravenous sedative medication is not required before TNE, the risk of complications is lower than with conventional endoscopy. The most common complication associated with TNE is nosebleed. The procedure itself can be performed in less than 30 minutes.

### When is TNE Used?

We may use TNE to examine patients who have problems with their voice, swallowing difficulties, cough, or the sensation of something stuck in the throat (globus sensation). A common cause these problems is gastroesophageal reflux disease (GERD). Patients suffering from GERD may benefit from TNE, as it can reveal manifestations of GERD in the esophagus. Transnasal esophagoscopy may also be used to examine patients who have swallowing difficulties (dysphagia) due to obstructive or mechanical problems. Challenging symptoms such as chronic cough can be better understood through TNE. The procedure can allow physicians to view the effects of GERD in the throat; effects that are far more common than previously realized and that may increase patients' risks for cancer of the larynx and hypopharynx.

### Home Care Instructions:

- Rest voice for 24 hours.
- Increase your diet starting with soft foods and then as tolerated.
- Take medications as prescribed.

### Possible Side Effects:

- Temporary bloating and/or gas from placing air in the stomach during the procedure.
- Throat pain possibly lasting up to one week is possible.

### Contact your physician if:

- There is any sign of bleeding.
- You have a fever above 101.5°.
- You have a lower grade fever lasting more than three days.
- You have any questions or concerns.