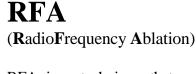
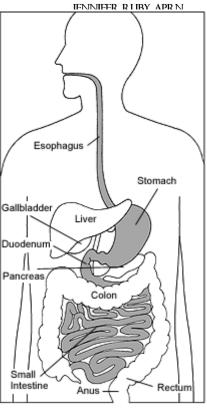




PRIYA JAMIDAR, MD HARRY ASLANIAN, MD JAMES J FARRELL, MD HILLARY DRUMM, APRN



RFA is a technique that uses heat to cause tissue death to unwanted tissue, such as Barrett's Esophagus with dysplasia. Barrx HALO ablation delivers radiofrequency energy (heat) to burn the Barrett's tissue in the esophagus using a balloon catheter (HALO 360) or a smaller catheter (HALO 90) during an upper endoscopy procedure. This may be done during one or multiple visits depending on the length and extent of the Barrett's tissue. Once the layer of Barrett's tissue is burned off, the healthy tissue can re-grow in its place, though you will still need to be monitored at regular intervals to ensure the Barrett's tissue has not returned. We work with expert pathologists and Rarely biopsies may not represent the actual cytologists. situation and give falsely negative or positive findings. work to integrate each piece of information into the overall picture and determine a treatment plan to fit you.



# What to Expect with your Endoscopy with RFA

Before

Do not eat or drink anything after midnight the night before your procedure. On the day of your RFA, you will arrive 30 minutes before the procedure is scheduled. You will put on a hospital gown and remove jewelry, eyeglasses, contacts, and dentures. The doctor and/or nurse will explain the procedure again and answer any questions you might have. You will be asked to sign a consent form giving your permission for the procedure. A nurse will put an IV in your arm before the procedure for hydration and for sedation medication. You will be connected to a machine that will monitor your heart rate, blood pressure and blood oxygen level throughout the procedure.

## During

Local anesthetic will be sprayed into your throat to make it numb, and you will be given medication through the IV to make you sleepy. A mouth guard will protect your teeth and gums. While in a comfortable position on your left side, the doctor will pass the endoscope through your mouth and down your esophagus. The endoscope will not interfere with your breathing. Once the scope is in your esophagus, the doctor will visualize the Barrett's tissue and determine where the RFA treatment should be directed. Depending on the length of the Barrett's segment, the doctor will use the HALO 360, which can treat the full circumference of the esophagus, 3cm at a time, or the HALO 90, which treats smaller areas that do not span the circumference of the esophagus. The doctor will then treat the Barrett's tissue with the HALO catheter, while minimizing damage to the healthy tissue surrounding it and the deeper tissue of the esophagus. The treatment generally takes 30-90 minutes depending on the severity of the disease.







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### **After**

You will wake up from the sedation in the recovery room. Your throat may feel sore. Because of the sedation, you should not attempt to take anything by mouth for at least 1 hour. In most cases, a liquid diet can be resumed later in the day. You will remain in the recovery area up to 2 hours. A companion must be able to drive you home, as the sedation impairs your reflexes and judgments. For the remainder of the day you should not drink alcohol, drive any type of vehicle, operate machinery, or make any important decisions. We suggest you rest quietly. For the next 48 hours after your procedure, you should continue to consume only liquids. For the next 5-7 days, you should consume a soft food diet. The doctor will give you a prescription of 2% viscous lidocaine to mix with over-the-counter Maalox to soothe the considerable chest discomfort that will likely occur and a prescription for an anti-emetic suppository such as promethazine 25mg for any nausea or vomiting. You may be given a prescription for sucralfate, an oral suspension to coat your esophagus. You should avoid Aspirin, Motrin, Advil, Aleve, ibuprofen or any other non-steroidal anti-inflammatory drug (NSAIDS) for 1 week following your procedure. It is important that you continue to take your acid reducing medicine (Nexium, Prilosec, Prevacid, Protonix, etc) twice daily for the duration of your RFA treatments.

**Examples of liquids:** fruit juices, coffee, tea, Kool-Aid, Crystal Light, flavored water, Gatorade, Powerade, water, Sprite, ginger ale, seltzer, broth, bouillon, fruit ices (without chunks of fruit), popsicles, Jello, milk shakes, pudding

**Examples of soft foods:** All liquids, mashed potatoes, well-cooked pasta, soft white bread, tuna salad, scrambled eggs, egg salad, soup (with no big solid pieces in it), oatmeal, applesauce, pudding, yogurt, cottage cheese, milk shakes, ice cream

**Foods to Avoid:** Alcohol, crunchy food or food you must chew a lot such as meat, chips, sharp seeds or nuts.

# Risks/Side Effects

RFA will often cause considerable chest discomfort, sore throat, difficulty/pain with swallowing, and/or nausea and vomiting. These side effects gradually improve each day. If your symptoms are severe, last longer than 5-7 days, or are getting worse instead of better, please contact us.

Endoscopy can rarely (1 in 2000) result in complications such as reactions to the medications, making a hole in the digestive wall (perforation of the esophagus, stomach or intestines), and bleeding. While these complications are not common, in certain cases they can be serious and may require urgent treatment, an extended hospitalization, or even an operation. With RFA, there is a (6%) risk of esophageal stricturing (narrowing), which may require endoscopic procedures to dilate.

Please take the time to consider the benefits and the risks this procedure has to offer you.

Drs. Jamidar, Aslanian & Farrell want you to have the best procedure experience possible.

Please call with any questions, concerns or problems.

M-F 8:30 am-4:30 pm at (203) 200-5083

August 2016







PRIYA JAMIDAR, MD HARRY ASLANIAN, MD JAMES J FARRELL, MD HILLARY DRUMM, APRN JENNIFER RUBY, APRN

	Your Endoscopy with RFA is scheduled for			
_		at	_am/pm;	_am/pm arrival with
Dr. Jamidar	/ Dr. Aslanian/ Dr	. Farrell at the Y	ale Center for Ad	vanced Endoscopy on Smilow

# Instructions for your Endoscopy with RFA

### Two Weeks before your Endoscopy with RFA

- 1. Call us if you have **allergies** or bad reactions to antibiotics, medications or anesthesia.
- 2. Call us if you have **heart** or **breathing** problems, as we will need recent records of tests and visits from your heart and lung doctor before the procedure.
- 3. Call us if you take **blood thinners** like Coumadin/warfarin or Plavix or aspirin, as they may need to be adjusted before your procedure.
- 4. Call us if you have **diabetes**, as your medications may need to be adjusted the AM of, or PM before your procedure.
- 5. Call us if you are on **dialysis** or have **kidney** problems, as you will need bloodwork before your procedure.

#### The Night before your Endoscopy with RFA

1. Do not eat or drink ANYTHING after midnight, including gum/candy or cigarettes. You may take regular PM and AM medications with a small sip of water (though blood thinners and diabetes medications may have to be adjusted).

#### The Day of your Endoscopy with RFA

- 1. Arrive at the Center for Advanced Endoscopy 30 minutes before your procedure is scheduled.
- 2. Validated parking is available at the Smilow Cancer Hospital Valet Service.

# After your Endoscopy with RFA

- 1. For the rest of the day, you should not operate a vehicle, heavy machinery or make important decisions. A companion must drive you home; sedation affects your reflexes and judgments.
- 2. For **48 hours** after the RFA, you should consume a **liquid-only diet**.
- 3. For the next **5-7 days** you may advance to a **soft food diet**. Consuming a regular diet with non-soft items can cause severe chest discomfort and may cause trauma to your esophagus.
- 4. You may be given 2 prescriptions:
  - #1: 2% viscous lidocaine/Maalox, 30ml by mouth every 4-6 hours as needed for chest discomfort #2: sucralfate suspension, 10ml by mouth before meals as needed to coat your esophagus
- 5. Continue your acid reducing medicine (Nexium, Prilosec, Prevacid, Protonix, etc) twice daily for the duration of your RFA treatments.
- 6. You should avoid Aspirin, Motrin, Advil, Aleve, Ibuprofen or any other Non-steroidal Anti-inflammatory Drug (NSAIDS) for **1 week** following your procedure.

Drs. Jamidar, Aslanian & Farrell want you to have the best procedure experience possible. Please call with any questions, concerns or problems.

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