

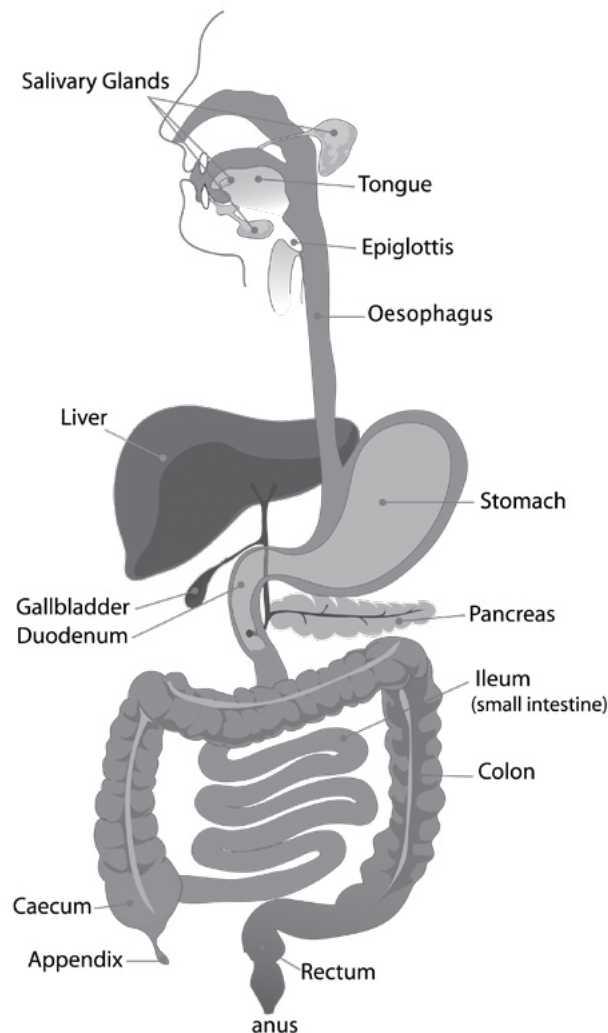
Having a Trans Nasal Gastroscopy (TNG)

Information for patients and carers

Endoscopy

What is a Trans Nasal Gastroscopy (TNG)?

A TNG is an examination of the upper part of the gut, including the lining of the gullet (oesophagus), stomach and first part of duodenum. It involves an endoscope (a thin flexible tube with a bright light at the end) being passed through your nose and then down over the back of your tongue and into your stomach.



https://commons.wikimedia.org/wiki/File:Digestive_system_simplified.svg

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What are the benefits of having a TNG?

The benefits of a TNG are that it can help to diagnose the cause of your problems and rule out other conditions.

TNG is an alternative to a Trans Oral (through the mouth) Gastroscopy. TNG is easier to tolerate because it uses a smaller tube through the nose.

Benefits include:

- Patients are more relaxed.
- Gagging is less common.
- More successfully completed procedures.
- You can talk during the procedure and let us know if you have any discomfort.
- You recover more quickly after the test.
- Sedation is not necessary, so you can drive, return to work, and do not need anyone to accompany you.
- The next steps can be discussed immediately after the procedure as there is no sedation.

What are the risks of the procedure?

- Slight nose or throat pain. This usually settles within a few hours
- Nose bleeds can occur in about 1 in 20 people who have a TNG. Most nose bleeds stop without the need for treatment. A small number of patients (around 1 in 400) may require further treatment for a bleeding nose.
- You may experience bloating and abdominal discomfort for a few hours after the procedure.
- Perforation (making a hole in the gut) is a very rare complication. It happens in about 1 in 5000 patients and may require an operation to repair the damage
- There is a small risk of bleeding from inside the oesophagus, stomach or duodenum (1 in 10000 cases) which may be serious enough for you to be admitted to hospital and need treatment with a blood transfusion
- Like all tests there is a risk the procedure will not show up all abnormalities, and on very rare occasions a significant abnormality may not be identified.

If you have any questions about the risks of this procedure, please ask the endoscopist doing the test or the person who has referred you.

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What are the alternatives to this procedure?

If you really want to be sedated to undergo the test, then you can be rebooked for a Trans Oral Gastroscopy with sedation.

In some cases, depending on your symptoms and condition, a barium swallow or barium meal X ray test may be an alternative. However they cannot clearly see the lining of your oesophagus, stomach and duodenum. Some conditions can only be detected by a gastroscopy type test rather than a barium swallow or meal.

What are the risks of not having the procedure?

You have been referred for this procedure to look for conditions affecting the gullet (oesophagus), stomach and the first part of the small bowel (duodenum). If you do not undergo the test we may not be able to detect an abnormality that would require further treatment.

What do I need to do before attending for a TNG?

- Do not eat any food and avoid chewing gum for at least 6 hours before the test.
- Clear water can be taken up to 2 hours before the test. No other fluids are permitted.
- If your symptoms have improved, the test will still need to be performed as we need to check for any abnormalities in your stomach.
- If you need the help of an interpreter to understand any of this information, or on the day of the procedure, please contact us as soon as possible.
- If you are unable to attend your appointment for any reason, please let us know as soon as possible so that your appointment can be offered to somebody else. If you fail to attend without giving us more than 24 hours' notice, then you may not be offered another appointment.

Medication

You may continue to take antacids e.g., Gaviscon or Asilone if required but not within 3 hours of the test.

If you take diabetic tablets or insulin, or tablets that thin the blood (such as dabigatran, apixaban, rivaroxaban, edoxaban, clopidogrel/ Plavix, prasugrel) please contact the unit as your appointment may need to be altered and you may need additional information.

You may continue to take your other usual medication. Please bring any medication you are currently taking (including sprays and inhalers) with you to your appointment and details of any allergies or reactions to medicines in the past.

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What happens when I arrive at the hospital?

Your appointment should last less than 1 hour. When you arrive, please report to the reception desk at the endoscopy unit where a receptionist will check your details and direct you to the waiting area. Please do not bring any valuables or jewellery to the hospital. We do not usually allow friends or relatives to stay with you whilst you are having the test carried out.

A nurse will explain the procedure to you to make sure you understand the benefits and possible risks as detailed in this leaflet. The staff will want you to be as relaxed as possible for the test and will not mind answering questions. Provided you are happy for the procedure to be performed you will be asked to sign your consent form. The form also asks for consent for further procedures that may be necessary including taking tissue samples (biopsies) that may be helpful in diagnosing your problem.

What happens during the test?

The TNG will take place in a private room with only you, the endoscopist and the nursing staff present. You will not have to undress or change into a gown. You will be asked to remove any dentures. The test usually takes about 10 minutes.

You may be asked to take a special drink before the test. This helps clear bubbles in your stomach and allows a clearer view. Additionally some spray will be sprayed into your nostrils and onto your throat to make it easier for you as the tube is passed.

In the examination room you will be asked to lie on an examination couch on your left side. A nurse will stay with you throughout the procedure. The endoscope will then be passed through your nose and down into the stomach. This should not cause pain or interfere with breathing but it may be uncomfortable. Air will be passed into your stomach to allow a clearer view. If you have a lot of saliva in your mouth, the nurse will clear it with a sucker.

What happens after the test?

You will not be able to eat or drink for an hour after the test to allow the effects of the spray to wear off. You can then leave the unit to go back home or back to work.

When will I know the results?

The test results will be explained to you immediately following the procedure. If biopsies have been taken, then these will need to be sent to the laboratory for testing and so the results will take longer. We will explain when we expect these results to be available. You will also be given a written report of the procedure and instructions as to what to do if you have any problems following the test. A copy of the report will be sent to your GP. We will also try to let you know what the next step in your care will be.

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If you have any concerns please contact us:

Sandwell Hospital patients

0121 507 3467 or 0121 507 3460

Birmingham Treatment Centre patients

0121 507 5318

Mon-Fri 9am – 4:30pm

Sources used for the information in this leaflet

British Society of Gastroenterology and Association of Upper Gastrointestinal Surgeons of Great Britain and Ireland. (2017). Quality standards in upper gastrointestinal endoscopy: a position statement of British Society of Gastroenterology (BSG) and Association of Upper Gastrointestinal Surgeons of Great Britain and Ireland (AUGIS). [Online] Available at: https://www.bsg.org.uk/wp-content/uploads/2019/12/Quality-standards-in-upper-gastrointestinal-endoscopy_-_position-statement-of-BSG-AUGIS.pdf (Accessed 03 November 2022).

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ML6859

Issue Date: February 2023
Review Date: February 2026