

Oesophageal manometry: information for families

Manometry is a way of measuring how well the muscles and nerves in the digestive system are working. Oesophageal manometry looks at the muscles and nerves in the oesophagus (foodpipe). This information sheet from Great Ormond Street Hospital (GOSH) explains about the oesophageal manometry test and what to expect when your child has one. An Easy Read information sheet is included for your child.

The digestive system is a hollow tube from the mouth to the anus. The walls of the tube contain muscles and nerves that squeeze food rhythmically through the system – this action is called peristalsis. If the muscles and/or nerves are not working properly, food cannot pass through the digestive system.

What happens before the test?

You will already have received information about how to prepare your child for the test in your admission letter.

The person bringing your child to the test should have 'Parental Responsibility' for them. Parental Responsibility refers to the individual who has legal rights, responsibilities, duties, power and authority to make decisions for a child. If the person bringing your child does not have Parental Responsibility, we may have to cancel the test.

The doctors will explain about the test in more detail, discuss any worries you may have and ask you to sign a consent form giving permission for your child to have the test.

If your child has any medical problems, particularly allergies, please tell the doctors about these. Please also bring in any medicines that your child is currently taking and show these to the doctor.

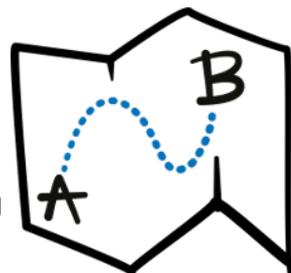
If your child is taking domperidone, erythromycin, baclofen or metoclopramide please stop them 72 hours before the day of the test.

This investigation is done while your child is awake. If your child also needs a gastroscopy, the manometry catheter can be placed at the same time as the gastroscopy.

If your child is due to have an anaesthetic for a gastroscopy, please refer to the gastroscopy information sheet for instructions as well as this one. Fasting times are provided in your admissions letter.

What does the test involve?

You and your child will be taken to the Gastroenterology Investigation Suite where the test will take place. There will be a nurse or doctor with your child all the time.



The nurse or doctor will put the catheter into one of your child's nostrils and pass it down the back of their mouth into the oesophagus. The catheter contains lots of sensors that can record nerve and muscle reactions.

Inserting the catheter does not hurt, but it may be uncomfortable. Your child may cough, sneeze or gag when the catheter is passed. If your child is awake when the catheter is passed, you can stay with them the entire time.

The catheter will be taped to your child's cheek to stop it from moving. Once the catheter is in the correct place, the catheter is attached to a machine, which measures how well the muscles and nerves are working.

During the test your child will need to drink and then eat something. If your child is having this test because food gets stuck, it is a good idea to bring a food that typically gets stuck with you.

If your child has food allergies, you may wish to bring something that they like with you. However, there is a special diet kitchen that can prepare food for allergies. Please inform the nurse on your arrival if your child will require a special meal.

Are there any risks?

When the catheter is being inserted, it can scratch the inside of the nose and make it bleed. This rarely causes any serious problems.

There is very small risk the catheter could damage your child's oesophagus. However, this is very unlikely as the catheter is flexible and the doctors and nurses who do the test are very experienced.

If your child is having an anaesthetic for this test, their sleep pattern may be altered for up to 48 hours after the test. The time it takes to recover

from an anaesthetic varies from child to child – encourage your child to rest if they are still sleepy the following day.

As your child had nothing to eat or drink for some time before this test, there is a small chance that they may be mildly dehydrated afterwards. Symptoms of dehydration include dry lips, pale skin, sunken eyes, not passing urine. While on the ward and also once you get home, encourage them to drink as frequently as possible.

What happens afterwards?

After the test, the nurse or doctor will remove the catheter and your child will be able to go home. If your child has had an anaesthetic your child will return to the ward. Once they have passed urine and the nurses are happy your child is recovering, they will remove the cannula and you will be able to go home.

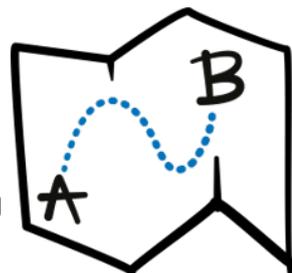
When you get home

Your child can carry on doing what they usually do – there are no restrictions on their activity.

If your child had a gastroscopy at the same time, please follow the instructions on the gastroscopy information sheet as well as this one.

How long will it take to get the results?

Your child's test results will be given to you at your child's next outpatient appointment at the hospital. The analysis of this test is complicated so may take some time to get the results. However if they need to start on new treatment before the appointment the hospital will contact both you and your child's family doctor (GP) with details.



Having a foodpipe manometry test



Your digestive (said: dy-jess-tiv) system is a long tube that goes from the mouth all the way to your bottom. When you eat or drink something, it travels through this tube and all the goodness is taken out so your body can use it. Anything left over comes out of your bottom as poo.



Muscles and nerves squeeze the food downwards. If the muscles and nerves do not work well, food cannot travel downwards as it should.



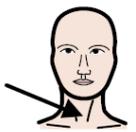
Most children will be awake for the test. It will not hurt.



Some children have an anaesthetic (said an-ess-thet-ick) for the test. You will not be able to feel anything or know what is happening.



You must not eat or drink anything before the test.



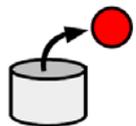
The doctor or nurse will put a bendy tube down your throat into your tummy. The tube has lots of sensors in it to check your muscles and nerves.



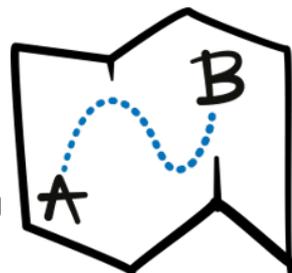
The bendy tube is joined to a computer. The sensors measure how well your muscles and nerves are working.



You can have something to eat and drink as part of the test. The computer will record your muscles and nerves.



When the doctors have checked the computer, they will remove the bendy tube.





The nurses will check you regularly to make sure you are getting better. You can then go home.



The doctors will write a report about the test and results.



Please ask us if you have any questions.

