

PATIENT EDUCATION

Halo Ablation

What is halo ablation?

Halo ablation is a treatment for Barrett's esophagus. Halo ablation uses heat energy to destroy abnormal cells in the esophagus.

- Halo ablation is done during an upper endoscopy (EGD).
- Treatment is done as an outpatient.
- No incisions are made.

How do I prepare for the halo ablation?

- Be sure to follow your specific diet instructions given by your provider.
- Some of the medicine you take may need to be stopped or adjusted temporarily. You should discuss all blood thinners, insulin, or diabetes medications with the prescribing provider at least 2 weeks before the pH halo ablation. Do not stop these medications without the content of your provider.
- Be sure to let your provider know if you are pregnant before the day of the exam.

What are the potential complications?

- Undesired effects from anesthesia.
- A tear in the wall of the esophagus, stomach, or small intestine.
- Bleeding.
- Stenosis (narrowing of the esophagus).
- Pain associated with procedure such as heartburn or chest discomfort.
- If you have any questions, please ask your doctor.

What should I expect before the halo ablation?

- Your provider will explain the risks and benefits of the halo ablation to you.
- You will sign a consent form for the procedure.
- A small IV will be put in a vein so sedation can be given during the procedure.
- Dentures and glasses will be removed prior to the procedure.

What can I expect during the halo ablation?

- You will lay on your left side.
- Your blood pressure, pulse, respirations, and oxygen levels will be monitored during the procedure.
- Your provider will put air into your stomach so the entire area can be seen.
- You may be given a medication called Mucomyst during the procedure.

What can I expect after the halo ablation?

- Your blood pressure, pulse, and respirations will be monitored in the recovery area.
- You might have oxygen on for a short time.
- Most patients experience heartburn or chest discomfort. You may also experience Nausea or sore throat. You may be given medications to help with pain, nausea, and heartburn. Your provider will explain how and when to use these medications at time of discharge if they are needed after the procedure.
- Your family and friends can be with you after the procedure.

- If you are taking Coumadin, Plavix, or other blood thinners, ask your provider when to restart those specific medications.
- Avoid aspirin or non-steroidal anti-inflammatory medications for seven days.
- You will need to follow a full liquid diet for 24 hours and then advance to a soft diet for one week.
- The nurse will give you written discharge instructions before you leave.

Reference:

Barrett's Esophagus Brochure.
BARRX Medical - www.barrx.com