

Direct Laryngoscopy, Rigid Esophagoscopy, Bronchoscopy

What anatomy is involved?

The mouth, throat, and voice box are viewed in great detail. The esophagus, or food tube, is also examined. The airway, or windpipe, is inspected down into the lungs. When all 3 procedures are done together, it is commonly called a triple endoscopy. Sometimes only 1 or 2 of the procedures will be done depending on what is required.

When is surgery needed?

Surgery is typically done in a patient with a suspected cancer of the head and neck region. The location of the tumor or mass, what it is close to, and its size, will all give indication as to how advanced the cancer is. A sample of the tumor may also be biopsied. Other reasons for surgery are to map out or exclude an injury of the airway or food tube. A foreign body in the voice box, food tube, or airway may also require surgical intervention. There are other reasons that your doctor may discuss with you.

What exactly takes place?

Special stiff metal instruments with a viewing port are passed down the mouth and throat, as well as the food tube and breathing tube, as needed. All areas of the upper airway and digestive tract system are visualized in detail. Biopsies, small pieces taken for viewing under the microscope by a pathologist, may be taken if warranted. Sometimes a microscope is brought in to examine the voice box under magnification. Special instruments allow us to work in this area.

What can I expect after?

The surgery is usually done as an outpatient, and you may go home the same day.

- (1) Pain is typically minimal to moderate.
- (2) Significant bleeding or infection is rare.
- (3) There is a chance of damage to teeth, as the instruments are metal and must pass through the mouth.
- (4) A tear in the food tube may result, requiring surgery. This happens in less than 1% of cases, and is on the order of 1 in 1000.
- (5) Injury to the airway or lungs is possible and would require a tube in the chest or temporary breathing tube in the neck (tracheostomy).
- (6) The voice may be hoarse initially, and there may be some sore throat and slight difficulty swallowing. All of these conditions should improve in 2 to 3 days.
- (7) If you should experience high fever (greater than 102 degree Fahrenheit), trouble breathing, or significant problems swallowing after the surgery, call the doctor.

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