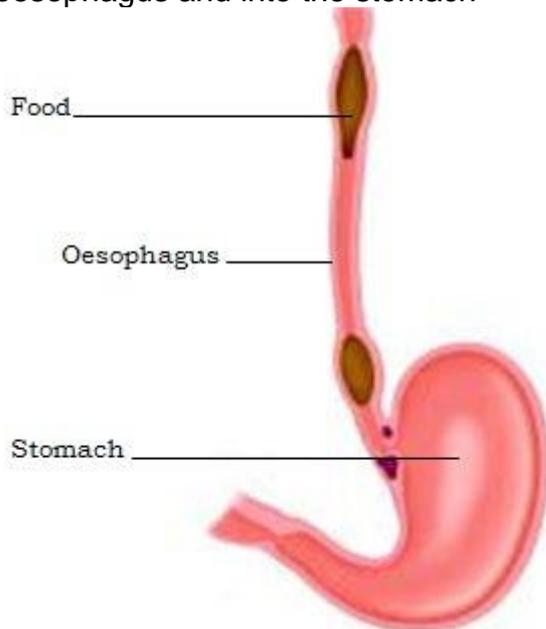


Oesophageal Motility Study

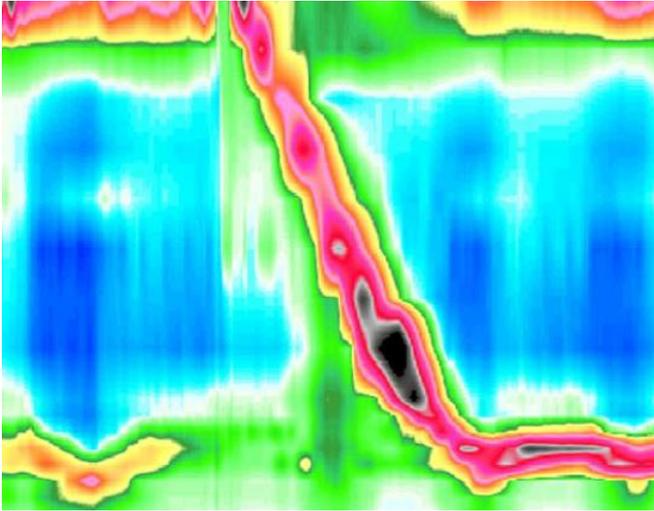
An oesophageal motility study is used to test how well the muscles and nerves of the oesophagus work, and provide information about the movement of food and drinks through the oesophagus and into the stomach



At RCH, we perform High Resolution Oesophageal Manometry that measures the muscle pressure along the whole length of the oesophagus as well of movements of liquid and gas. This includes how strongly the muscles squeeze with swallowing, and the pattern in which they squeeze.

It also measures how well the ring of muscle between the oesophagus and the stomach (the lower oesophageal sphincter or LOS) squeezes and relaxes.

Your doctor may order an oesophageal motility test if your child is experiencing difficulty in swallowing. Oesophageal manometry may also be performed to assess how well the muscles in the oesophagus are working before considering anti-reflux surgery. It can also be used to better understand what the stomach and LOS is doing in cases of frequent and difficult regurgitation.



Preparation for oesophageal motility

Your child will need to fast for a short time before the test. He / She may also be asked to stop some medicines beforehand

On the day

The test is performed while awake, and usually takes about 1 hour, but can be shorter or longer in some circumstances.

A very small, flexible tube will be gently inserted through your child's nose, down the throat and oesophagus, and into the stomach. The tube will then be taped to your child's cheek. The other end of the tube will be attached to a computer to record data from the many tiny sensors in the tube.

During the study your child will be asked to swallow fluids and jelly, and the muscle pressures will be recorded on the computer

At the end of the test the tube is removed. Your child can then eat and drink normally

Your child can return to normal activities and diet once the test has been completed