

Overview

- Esophageal manometry is a test that shows whether your esophagus is working properly.
- The esophagus is a long muscular tube that connects your throat to your stomach. When you swallow, your esophagus contracts, pushing food and liquids down into your stomach. Esophageal manometry measures these contractions as well as the force and coordination of the esophageal muscles.

Procedure

- During esophageal manometry, a thin, flexible catheter that contains pressure sensors is passed through your nose, down your esophagus and into your stomach.
- Lubrication and numbing agents will be used to ease the passing of the catheter into the stomach. However, esophageal manometry may cause discomfort to the throat and nose.
- Once the probe is in place you will lie back and be asked to take small sips of water while the computer records the pressure, speed, and pattern of your esophageal muscle contractions.
- During the test you will be asked to remain still, breathing slowly and smoothly and only swallowing when instructed to do so.
- Once the test is completed the catheter will be withdrawn from your nose. This action may cause slight irritation to the nose.
- No sedation will be used during this test. You will be able to leave immediately following the test and do not require a driver.

Patient Instructions

- **Do not eat** or drink anything six hours prior to your appointment.
- The following medications interfere with esophageal contractility and should be discontinued 24-hours prior to your appointment. If you are prescribed any of the below medications, confirm with your Primary Care Provider that it is safe to stop these medications.
- **If you have any concerns, please reach out to the Endoscopy Unit at 231-487-4398 or 231-487-5736.**

<ul style="list-style-type: none"> ➤ Nitrates <ul style="list-style-type: none"> • Nitroglycerine (Nitrostat, Nitrolingual, Nitro-Dur) • Nitro patches and pastes • Isosorbide Mononitrate (Imdur) ➤ Calcium-Channel Blockers <ul style="list-style-type: none"> • Nifedipine (Procardia) • Verapamil (Verelan) • Diltiazem (Cardizem, Tiazac) • Amlodipine (Norvasc) ➤ Anticholinergics <ul style="list-style-type: none"> • Propantheline • Atropine (Atropen) ➤ Pro-Motility Agents <ul style="list-style-type: none"> • Metoclopramide (Reglan) • Bethanechol (Urecholine) 	<ul style="list-style-type: none"> ➤ Sedatives <ul style="list-style-type: none"> • Diazepam (Valium) • Alprazolam (Xanax) • Clonazepam (Klonopin) • Lorazepam (Ativan) • Chlordiazepoxide (Librium) ➤ Narcotics <ul style="list-style-type: none"> • Oxycodone (Oxycontin) • Acetaminophen-Hydrocodone (Norco) • Fentanyl (Duragesic) • Morphine • Codeine • Tramadol (Ultram) • Methadone
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