

Endoscopic Zenker's Diverticulum Repair / Cricopharyngeal Myotomy

What to expect for your surgery:

The surgery itself will be performed under general anesthesia and last between 1 ½ to 3 hours. Most patients will require an overnight stay.

The procedure will involve using a large scope in the mouth to access the part of your esophagus that is presumed to be causing swallowing difficulty. The muscle that is at the top of your esophagus will be cut and if a Zenker's diverticulum is present, it will be opened into your esophagus to prevent food from getting stuck.

At times, it may not be possible to perform this surgery endoscopically (through the mouth) and an open procedure will be performed to accomplish the procedure.

Please make sure not to eat or drink anything after midnight the night before unless you need a small sip of water for medications on the morning of the procedure.

Contact Info:

Maurits Boon, MD

Joseph Spiegel, MD

Colin Huntley, MD

Thomas Jefferson University
Otolaryngology – Head and
Neck Surgery

925 Chestnut Street, 7th Floor
Philadelphia, PA 19107

Phone: 215-955-6760

Fax: 215-503-3736

What to expect after your surgery:

Pain following the procedure varies. A prescription medication will be provided to control pain. An antibiotic will also be provided for postoperative use.

Please avoid any anti-inflammatory medications such as aspirin, ibuprofen, Motrin™, Advil™ or Naprosyn™. It is acceptable to use Tylenol™ or the prescription pain reliever provided. However, note that the pain prescription provided may contain Tylenol™ (Acetaminophen) and therefore, you should not use Tylenol™ if you are also using the prescription pain reliever.

While some patients may experience improvement in swallowing immediately following the procedure, others may not notice a difference for several weeks.

Only clear liquids are allowed on the evening following the procedure. On the first postoperative day you may start a soft diet. This diet should be maintained until your physician sees you in the office and clears you to resume a normal diet.

Please avoid any heavy lifting (less than 5 pounds) or straining until you are instructed that it is OK to do so.

You may shower on the first day after surgery.

Please call your physician if you experience any of the following: chest pain, upper abdominal pain, upper back pain, shortness of breath, neck swelling, bleeding, fever >100.5, inability to swallow liquids or excessive pain not controlled by the pain medication provided.

Your First Postoperative Visit:

A postoperative visit should be scheduled around 1 week after the procedure. If one has not been previously scheduled, please call the office for an appointment.

A fiber optic camera will be used to examine your vocal cords and throat. An additional follow up visit will be scheduled at approximately 6 weeks. Time.

You may resume normal activity and lifting after this visit.

Unless advised otherwise, you may start to advance your diet as tolerated. It is generally best to start with softer foods and advance to more solid foods as you feel more comfortable.

While most patients experience improvement in swallowing, the degree of improvement will vary. Some will notice that swallowing will improve to the normal range. Others will feel that there is a significant improvement but that there are still some foods and medications that may be more difficult. While it is unusual not to notice some improvement, there will be a small group of patients who don't feel that swallowing improved after surgery. If you are having continued problems, it should be discussed with your physician in follow up.

These instructions can be found online at: Philadelphiasleepsurgery.com