

Halo (BARRX) at Piedmont Hospital

What is a Halo "BARRX" procedure?

Halo is a procedure that uses radio frequency (RF) energy delivered to a specific area in the esophagus where Barrett's esophagus exists. Barrett's esophagus is a condition in which the esophagus changes so that some of the esophageal lining is replaced by a type of tissue similar to that normally found in the intestine. This change can sometimes lead to cancer of the esophagus.

During the Halo procedure, RF energy will destroy the Barrett's cells without destroying the normal tissue in the deeper layers of the esophagus. The esophagus is expanded by a balloon and the RF energy heats the Barrett's cells and destroys them allowing healthy new tissue to grow in place.

Most people need three to four Halo treatment sessions to achieve a cure. Some people will need more, some less. Halo treatment sessions are usually performed every two to three months until there is no more visible Barrett's esophagus. Your doctor will then take biopsy samples of your esophagus, similar to previous surveillance endoscopies you may have had to monitor your Barrett's esophagus. This is to confirm that your Barrett's esophagus is gone. In the peer-reviewed medical literature, published cure rates of Barrett's esophagus are roughly 80% with radio frequency ablation.

PRE-PROCEDURE CHECKLIST

If you have diabetes, ask your regular doctor for diet and medication restrictions. Do not take your oral diabetes medicine on the day of your procedure. If you take metformin, stop taking it the day before your endoscopy. Please bring your Insulin and Insulin syringes with you to your procedure; we will check your blood sugar before and after the procedure.

If you take a medication to thin your blood (such as Coumadin, Plavix, Pradaxia or Lovenox) be sure to discuss this with the doctor performing your procedure. You must get your prescribing doctor's permission if you need to stop these medications.

If you currently are taking other prescription medications, you may continue to take all other medications as instructed by the prescribing physician.

If you are or may be pregnant, please discuss the risks and benefits of this procedure with your doctor.

You MUST arrange for a ride for the day of your exam. If you fail to arrange transportation with a responsible adult, your procedure will need to be cancelled and rescheduled. Your driver must check in with you and stay in our office the entire time that you are there. We cannot start your procedure if you do not have a driver present. In addition to this, you may not take a taxi or ride the bus by yourself. This is for your safety.

If you must cancel or reschedule your appointment, please call 404-355-3200 at least three days prior to your procedure to avoid any late cancellation fees.

If you have any special needs, please notify the admitting nurse prior to your procedure (i.e. a pacemaker, internal defibrillator, latex allergy, need for an interpreter, or are allergic to eggs, nuts, or soy).

Please be certain to have all of the following items with you:

- Your completed pink Pre-Anesthesia Evaluation, which was included in your procedure packet.
- A list of all your current prescription medications and all your over the counter medications.
- A photo ID.
- All your up-to-date insurance information, such as your insurance card or required referral forms.

DAY OF EXAMINATION

The Piedmont Hospital GI lab is located on the first floor of the 77 building. It is most convenient to park in the North parking deck. Take the elevator to the bridge level (BR). You will need to go to the 77 building registration office to register for your procedure. After getting off at the bridge level you will walk through a glassed-in bridge and go straight. You will pass the 77 building (D) elevator, which will be located on your left. The registration office is located in the next hallway on your left. Once inside, a member of the registration staff will help you complete some additional paperwork, and then escort you to the GI Lab for your procedure. This should take approximately 15 minutes.

STOP AND READ:

- **If you do not follow these instructions your procedure may be delayed or cancelled.**
- **Please note that you cannot have any solid foods starting the day before your procedure.**
- **The day of the procedure you may not have gum, mints, ice chips, hard candies or cigarettes.**
- **You cannot have anything in your mouth (gum, mint, cough drop, ice chips etc.) two and a half hours before your procedure.**

PREPARATION

To ensure a successful exam, please follow all instructions carefully. Failure to accurately and completely prepare for your exam may result in the need for an additional procedure and both procedures will be billed to your insurance.

- Stop eating solid foods at midnight.
- Clear liquids are okay to drink (examples: water, Gatorade, clear broth, black coffee and apple juice).
- Do not drink red liquids or alcoholic beverages.
- You may have nothing by mouth (no water, gum, mints, ice cubes, etc.) at least 4 hours before your exam.
- You may take your usual medications (exceptions noted above) with up to 4 oz. of water at least 4 hours prior to your procedure. Be sure to wear comfortable clothes and shoes that will remain on your feet (preferably tennis shoes) to your procedure. Please do NOT wear flip flops, sandals, or backless shoes.
- Please remove ALL jewelry including earrings, rings, bracelets, anklets, necklaces, and watches prior to the procedure, and be sure to leave any and all valuables at home.
- Plan to spend up to two hours at the endoscopy center the day of your procedure. The exam itself takes about 30-60 minutes to complete.

Before the exam:

- You will change into a gown and robe.
- Your medical history will be reviewed with a nurse and an anesthesiologist.

- You will be given a consent form to sign.
- A nurse will insert an intravenous (IV) line into your hand or arm.
- Pre-menopausal women will be asked to give a urine sample for a pregnancy test.

During the exam:

- Medicine will be given through the IV line to help you relax and feel drowsy.
- Your heart rate and oxygen levels will be monitored.
- The doctor will insert a flexible, hollow tube - called an endoscope - into your mouth and will advance it slowly through the esophagus, stomach and duodenum (the first part of your small intestine).

What should I expect after the procedure?

- You will rest for 30 to 60 minutes after the procedure.
- The doctor will talk with you about the results of your Halo procedure before you leave the endoscopy center.
- A nurse will provide you with complete discharge instructions before you leave the endoscopy center. Be sure to ask the nurse for specific instructions if you take blood thinners such as aspirin, Coumadin or Plavix.
- Your throat may feel sore, and it may be painful to swallow.
- You may experience mild chest pain or nausea for two to three days. This is normal.
- Medication or anesthesia given during the procedure will prohibit you from driving for the rest of the day.
- Diet instruction will be discussed with you before you leave the endoscopy center. A liquid diet may be recommended for one or two days following therapy.
- You should avoid sharp-edged foods (such as chips, nuts, popcorn, croutons, etc.) during this period.
- You may resume your regular activities the day after the procedure.
- A follow-up endoscopy exam is necessary two to three months after treatment to make certain that all abnormal cells have been eliminated.

Are there possible complications from a Halo procedure?

Although serious complications are rare, any medical procedure has the potential for risks. A nurse will review all potential warning signs with you before you leave the endoscopy center. Risks include:

- Perforation, or a tear, of the lining of the stomach or esophagus.
- Bleeding from the biopsy site, if any tissue was removed.
- Reaction to medications used during the procedure.