

PATIENT & CAREGIVER EDUCATION

About Your Barrx™ Ablation

This information will help you get ready for your Barrx ablation procedure at MSK.

Barrx ablation is a procedure used to treat Barrett's esophagus. Your esophagus is the tube that carries food and liquids from your mouth to your stomach. Barrett's esophagus is caused by years of damage to the lining of your esophagus. Barrett's esophagus can develop if you have gastroesophageal reflux disease (GERD). This is a disorder where stomach acid flows back into your esophagus, causing heartburn, redness, and swelling.

In Barrett's esophagus, the cells lining your esophagus become abnormal (not normal). These abnormal cells can turn into cancer. Your healthcare provider can stop these cells from turning into cancer by destroying them with a Barrx ablation procedure.

Read the resource *Barrett's Esophagus* (https://sandbox18.mskcc.org/pe/barretts_esophagus) for more information on this condition.

About Your Procedure

You will have your Barrx ablation during an upper endoscopy procedure. For the upper endoscopy, your healthcare provider will use a flexible tube called a gastroscope to look at the inside of your esophagus on a television monitor. Barrx ablation uses radiofrequency energy (heat) to kill the abnormal cells. Killing these cells can prevent the tissue from turning into cancer. Once the abnormal cells are gone, new, healthy cells can replace them.

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1 Week Before Your Procedure

Ask about your medications

You may need to stop taking some of your medications before your procedure. Talk with your healthcare provider about which medications are safe for you to stop taking. We have included some common examples below.

Anticoagulants (blood thinners)

If you take a blood thinner (medication that affects the way your blood clots), ask the healthcare provider performing your procedure what to do. Their contact information is listed at the end of this resource. Whether they recommend you stop taking the medication depends on the reason you're taking it.

Do not stop taking your blood thinner medication without talking with your healthcare provider.

Examples of Blood Thinners			
apixaban (Eliquis®)	dalteparin (Fragmin®)	meloxicam (Mobic®)	ticagrelor (Brilinta®)
aspirin	dipyridamole (Persantine®)	nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Advil®) or naproxen (Aleve®)	tinzaparin (Innohep®)
celecoxib (Celebrex®)	edoxaban (Savaysa®)	pentoxifylline (Trental®)	warfarin (Coumadin®)
cilostazol (Pletal®)	enoxaparin (Lovenox®)	prasugrel (Effient®)	
clopidogrel (Plavix®)	Fondaparinux (Arixtra®)	rivaroxaban (Xarelto®)	
dabigatran (Pradaxa®)	heparin (shot under your skin)	sulfasalazine (Azulfidine®, Sulfazine®)	

Please read our resource *How To Check if a Medicine or Supplement Has Aspirin, Other NSAIDs, Vitamin E, or Fish Oil*

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(https://sandbox18.mskcc.org/pe/check-med-supplement). It has important information about medications you'll need to avoid before your procedure and what medications you can take instead.

Medications for diabetes

If you take insulin or other medications for diabetes, ask the healthcare provider who prescribes the medication what you should do the morning of your procedure. You may need to change the dose before your procedure.

Get a letter from your healthcare provider, if necessary

If you have an automatic implantable cardioverter-defibrillator (AICD), have had recent chest pain, or have recently fainted, you will need to get a letter from your cardiologist (heart doctor) before you have this procedure. Tell your healthcare provider if you have had a recent stroke or seizure, or if you can't walk up 1 flight of stairs without having trouble breathing.

Arrange for someone to take you home

You must have a responsible care partner take you home after your procedure. A responsible care partner is someone who can help you get home safely. They should be able to contact your care team if they have any concerns. Make sure to plan this before the day of your procedure.

If you don't have a responsible care partner to take you home, call one of the agencies below. They'll send someone to go home with you. There's a charge for this service, and you'll need to provide transportation. It's OK to use a taxi or car service, but you still need a responsible care partner with you.

Agencies in New York

VNS Health: 888-735-8913

Caring People: 877-227-4649

Agencies in New Jersey

Caring People: 877-227-4649

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3 Days Before Your Procedure

You will get a call from an endoscopy nurse. They will review the instructions in this guide with you and ask you questions about your medical history. The nurse will also review your medications and tell you which ones to take the morning of your procedure.

The Day Before Your Procedure

A staff member from the Admitting Office will call you between 12:00 p.m. and 5:00 p.m. on the day before your procedure. If your procedure is scheduled on a Monday, you will be called on the Friday before. If you don't receive a call by 7:00 p.m., please call212-639-5014.

If you need to cancel your procedure for any reason, call the healthcare provider who scheduled it for you.

Instructions for eating and drinking: 8 hours before your arrival time



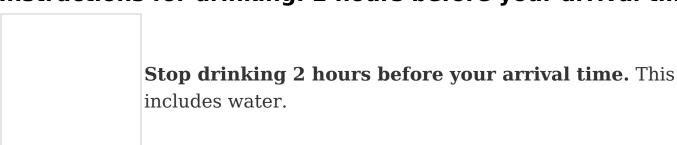
- Stop eating 8 hours before your arrival time, if you have not already.
 - Your healthcare provider may tell you to stop eating earlier. If they do, follow their instructions.
- 8 hours before your arrival time, do not eat or drink anything except these clear liquids:
 - Water.
 - Soda.
 - Clear juices, such as lemonade, apple, and cranberry juices. Do not drink orange juice or juices with pulp.
 - Black coffee or tea (without any type of milk or creamer).
 - Sports drinks, such as Gatorade[®].

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• Gelatin, such as Jell-O[®].

You can keep having these until 2 hours before your arrival time.

The Day of Your Procedure Instructions for drinking: 2 hours before your arrival time



Things to remember

- If you wear contact lenses, wear your glasses instead. Wearing contact lenses during this procedure can damage your eyes. You can't wear your contact lenses in the procedure room.
- Don't put on any lotion or cream on your chest or arms. This could stop the EKG electrodes from sticking to your body properly.
- Leave valuable items (such as credit cards, jewelry, and your checkbook) at home.

What to bring with you

A list of the medications you take at home, including the dose.
Your rescue inhaler (such as albuterol for asthma), if you have one.
A case for your glasses.
Your Health Care Proxy form and other advance directives, if you have
completed them.

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Parking when you arrive

MSK's parking garage is located on East 66th Street between York and First Avenues. If you have questions about prices, call 212-639-2338.

To reach the garage, turn onto East 66th Street from York Avenue. The garage is located about a quarter of a block in from York Avenue, on the right-hand (north) side of the street. There is a pedestrian tunnel that you can walk through that connects the garage to the hospital.

There are also other garages located on East 69th Street between First and Second Avenues, East 67th Street between York and First Avenues, and East 65th Street between First and Second Avenues.

Paid valet parking is available at the David H. Koch Center for Cancer Care.

Where to go

Your procedure will take place at one of these locations:

David H. Koch Center

530 East 74th Street New York, NY 10021

Take the elevator to the 8th floor.

Endoscopy Suite at Memorial Hospital (MSK's main hospital)

1275 York Avenue (between East $67^{\rm th}$ and East $68^{\rm th}$ Streets) New York, NY 10065

Take the B elevator to the 2nd floor. Turn right and enter the Endoscopy/Surgical Day Hospital Suite through the glass doors.

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Once you're in the hospital

You will be asked to say and spell your name and birth date many times. This is for your safety. People with the same or a similar name may be having surgery on the same day.

Get dressed for surgery

When it's time to change for your procedure, you will be taken into a private room, and you will get a hospital gown, robe, and nonskid socks to wear.

Meet with your healthcare team

You will meet with a nurse before your procedure who will review your medical history with you. You will also meet the anesthesiologist (the doctor who will give you anesthesia). Then you will sign the consent form with the healthcare provider who will be doing the procedure. The healthcare provider will explain the procedure to you and answer all your questions.

Get ready for your procedure

When it's time for your procedure, you will be brought into the procedure room. Then you will be attached to equipment that monitors your heart, breathing, and blood pressure. You will receive oxygen through your nose. A mouth guard will be placed over your teeth to protect them.

Once you are comfortable, you will get anesthesia through your IV, and you will fall asleep.

During your procedure

Once you're asleep, your healthcare provider will pass the endoscope through your mouth and down your esophagus. While looking through the endoscope, your healthcare provider will treat the abnormal cells in your esophagus with radiofrequency ablation.

The procedure takes 30 to 60 minutes, depending on the size of the area being treated.

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After Your Procedure

In the Post-Anesthesia Care Unit (PACU)

When you wake up after your surgery, you will be in the Post-Anesthesia Care Unit (PACU). A nurse will be monitoring your body temperature, pulse, blood pressure, and oxygen levels.

Your nurse will take out your IV. If there's someone waiting with you, your nurse will explain your discharge instructions to both of you before you go home.

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Managing your symptoms

After your Barrx ablation, you may have:

- A sore throat.
- Chest discomfort.
- Trouble or pain with swallowing.
- Nausea (feeling like you might throw up).
- Vomiting (throwing up).

These symptoms should get better each day.

Let your nurse know if you have any of these symptoms. They can help you manage them. If you take anticoagulant, diabetes medication, or both, your healthcare provider will let you know when you can start taking them again.

At Home

Eating and drinking

It's important to follow these guidelines for eating and drinking after your procedure:

- Don't drink alcohol for 24 hours after your procedure.
- For the first 2 days after your procedure, you can drink liquids and eat soft foods, as tolerated. If you don't have trouble eating soft foods, you can start eating everything you would normally eat starting 3 days after your procedure.
 - Some examples of soft foods are liquids, mashed potatoes, pasta,
 oatmeal, applesauce, scrambled eggs, yogurt, pudding, and ice cream.

When to Call Your Healthcare Provider

Call your healthcare provider if you:

• Have a fever of 101 °F (38.3 °C) or higher.

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- Have chest pain.
- Have pain or trouble swallowing that's severe, getting worse, or lasts more than 24 hours.
- Have nausea or vomiting.
- Feel like food is stuck in your throat after you swallow it.
- Feel weak, like you're going to faint, or both.
- Have any other questions or concerns.

If you have any questions, contact a member of your care team directly. If you're a patient at MSK and you need to reach a provider after 5 p.m., during the weekend, or on a holiday, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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