Sialendoscopy

Sialendoscopy is a procedure that is used to examine the ducts (openings) of the salivary glands. A miniature telescope, known as a micro-endoscope, is inserted into the natural opening of the salivary gland duct as it enters the mouth. This allows the salivary gland ducts to be explored and small instruments can be inserted through the micro-endoscope to remove any salivary stones or debris that may be present. The salivary glands can also be washed out with saline (salty water) or other medications such as steroids and antibiotics. This is usually an out-patient procedure and will be carried out in the Oral and Maxillofacial Surgery department.

What does the procedure involve?

Usually the procedure can be done under local anaesthetic. Occasionally it is done under general anaesthetic, if it forms part of another procedure. The type of anaesthesia used will be discussed with you when you are seen in the outpatient clinic. The micro-endoscope is introduced through the glands natural opening inside your mouth. In most cases the opening will be gently stretched to allow the endoscope to be introduced into the gland. Very occasionally a small cut needs to be made at the opening of the duct to allow the introduction of the endoscope. This is usually only required if the opening of the duct is very tight.

Once the telescope is introduced the drainage tubes of the gland will be examined. To allow inspection of the ducts they need to be rinsed with fluid throughout the procedure. This rinsing will cause some temporary swelling of your gland. The swelling usually resolves within twenty-four hours. Small stones can be removed through the Micro endoscope. Larger stones can sometimes be broken into smaller pieces and removed through the endoscope. In some cases a combined endoscopic and surgical approach will be recommended. This is usually for large stones that have become stuck within the ducts. Narrowing of strictures of the duct can sometimes be stretched to allow better salivary flow.

How long does the operation take?

If the procedure is for examination of the duct system and diagnosis, the procedure usually takes between twenty minutes and half an hour. For interventional procedures, such as removal of stones or stretching of strictures, the procedure can take up to 45 minutes.

Will it be painful?

You will be given local anaesthetic during the procedure to alleviate the discomfort. Afterwards you will have some swelling of the salivary gland. You may need to take simple painkillers such as paracetamol or Ibuprofen.

Will I need to take any time off work?

You may need to take the rest of the day off work but most people are back to normal the following day.

Do I need to do anything after I get home?

After sialendoscopy, you will be advised to eat a soft, relatively bland diet. If your gland is swollen, gentle massage of it might help the swelling resolve more quickly but your surgeon will advise you about this
Are there any risks with the procedure?

While there are risks with any kind of interventional procedure, most patients have few or no complications. However, it is important you are aware of the possible complications and have the opportunity to discuss them with your surgeon.

Bleeding

This is very unlikely because the procedure does not usually involve any cuts in your mouth. If you have a combined surgical and endoscopic procedure, there is a slight risk of bleeding from the wound.

Infection

This is uncommon. If your surgeon thinks you may develop an infection in your gland you will be prescribed a course of antibiotics.

Nerve damage

There are several nerves near the salivary glands. However with endoscopic procedures it is very unlikely that these nerves will be bruised. There is a small risk of nerve injuries if combined surgical/endoscopic procedures are done.

What are the benefits of treatment?

The aim of endoscopic surgery is to try and improve your symptoms without having to remove the gland. There is good evidence that if the obstruction within a salivary gland can be removed, the gland will recover its function.

What are the disadvantages?

Not all problems can be dealt with endoscopically. For example large stones or stones that are stuck within the gland cannot be dealt with by sialendoscopy alone. In these situations the alternatives will be discussed with you at your outpatient clinic appointment.

What are the benefits and risks of alternative treatments?

The alternative to sialendoscopy is conventional surgery to remove a stone or blockage. Sometimes this can be done by making a cut inside your mouth. This is usually straightforward surgery, but does carry a risk of numbness of the tongue. Another alternative would be to surgically remove the affected gland. This has the benefit of solving the symptoms of recurrent swelling once and for all but carries risks of scarring and possible nerve injury. The nerves affected depend on which gland is to be removed. These risks would be discussed with you in the clinic if surgical excision of your gland was your preferred option.