



PATIENT & CAREGIVER EDUCATION

Esophageal Stent Placement

This information explains your esophageal stent placement, including how to get ready for your procedure and how to care for yourself after your procedure.

About esophageal stents

Your esophagus (food pipe) is the tube that carries food and liquids, including saliva, from your mouth to your stomach when you swallow. Esophageal cancer (cancer of your esophagus) can make it hard to swallow. This is called dysphagia.

In order to make it easier for you to swallow, your doctor has recommended that you get an esophageal stent. This is a hollow tube that's placed in your esophagus in the area of the tumor to hold the area open.

Esophageal stents are placed through your mouth. You don't need to have surgery. Most people return home on the same day as their procedure. Having a stent won't affect your cancer treatment.

1 week before your procedure

Ask about your medicines

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

Anticoagulants (blood thinners)

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

Here are some examples of blood thinners. There are others, so be sure your care team knows all the medicines you take. **Do not stop taking your blood thinner without talking with a member of your care team.**

<ul style="list-style-type: none"> • Apixaban (Eliquis®) • Aspirin • Celecoxib (Celebrex®) • Cilostazol (Pletal®) • Clopidogrel (Plavix®) • Dabigatran (Pradaxa®) • Dalteparin (Fragmin®) • Dipyridamole (Persantine®) • Edoxaban (Savaysa®) • Enoxaparin (Lovenox®) • Fondaparinux (Arixtra®) • Heparin injection (shot) 	<ul style="list-style-type: none"> • Meloxicam (Mobic®) • Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil®, Motrin®) and naproxen (Aleve®) • Pentoxifylline (Trental®) • Prasugrel (Effient®) • Rivaroxaban (Xarelto®) • Sulfasalazine (Azulfidine®, Sulfazine®) • Ticagrelor (Brilinta®) • Tinzaparin (Innohep®) • Warfarin (Jantoven®, Coumadin®)
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Please read *How To Check if a Medicine or Supplement Has Aspirin, Other NSAIDs, Vitamin E, or Fish Oil* (www.mskcc.org/pe/check-med-supplement). It has important information about medicines you'll need to avoid before your procedure and what medicines you can take instead.

Medicines for diabetes

If you take insulin or other medicines for diabetes, you may need to change the dose. Ask the doctor who prescribes your diabetes medicine what to do the day before and the morning of your procedure.

Do not take these medicines the day before or the day of your procedure:

- Metformin, such as Glucophage® or Glumetza®.
- Medicine that contains metformin, such as Janumet®.

GLP-1 medicines for weight loss

It's important to tell your healthcare provider if you take a GLP-1 medicine. You will need to follow special eating and drinking instructions before your surgery or procedure. It is very important to follow these instructions. If you do not follow them, your surgery or procedure may be delayed or canceled.

- Follow a clear liquid diet the day before your surgery or procedure. Do not eat any solid food. Read *Clear Liquid Diet* (www.mskcc.org/pe/clear-liquid-diet) to learn more.
- Stop drinking 8 hours before your arrival time. Do not eat or drink anything after this time, including clear liquids. You can have small sips of water with your medicines.

To learn more, read *Eating and Drinking Before Your Surgery or Procedure When Taking GLP-1 Medicines* (www.mskcc.org/pe/eat-drink-glp1).

Here are some examples of GLP-1 medicines. There are others, so be sure your care team knows all the medicines you take. Sometimes, these are prescribed to help manage diabetes or other conditions. Other times, they are prescribed for weight loss.

<ul style="list-style-type: none">• Semaglutide (Wegovy®, Ozempic®, Rybelsus®)• Dulaglutide (Trulicity®)	<ul style="list-style-type: none">• Tirzepatide (Zepbound®, Mounjaro®)• Liraglutide (Saxenda®, Victoza®)
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Get a letter from your doctor, if needed

- If you have an automatic implantable cardioverter-defibrillator (AICD), you need to get a clearance letter from your cardiologist (heart doctor) before your procedure.
- If you've had chest pain, trouble breathing that's new or worse, or have fainted in the last 6 weeks, you'll need to get a clearance letter from your doctor before your procedure.
- We must get your clearance letter(s) at least 1 day before your procedure.

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

3 days before your procedure

An endoscopy nurse will call you between 8 a.m. and 6 p.m. 3 days before your procedure. The nurse will review the instructions in this guide with you and ask you questions about your medical history. They'll also review your medicines and tell you

which medicines to take the morning of your procedure.

The day before your procedure

Instructions for eating

Important: If you take a GLP-1 medicine, do not follow these instructions. Follow the instructions in *Eating and Drinking Before Your Surgery or Procedure When Taking GLP-1 Medicines* (www.mskcc.org/pe/eat-drink-glp1) instead.



Stop eating at midnight (12 a.m.) the night before your surgery or procedure. This includes hard candy and gum.

Your healthcare provider may have given you different instructions for when to stop eating. If so, follow their instructions. Some people need to fast (not eat) for longer before their surgery or procedure.

The day of your procedure

Instructions for drinking

Important: If you take a GLP-1 medicine, do not follow these instructions. Follow the instructions in *Eating and Drinking Before Your Surgery or Procedure When Taking GLP-1 Medicines* (www.mskcc.org/pe/eat-drink-glp1) instead.

Between midnight (12 a.m.) and 2 hours before your arrival time, only drink the liquids on the list below. Do not eat or drink anything else. Stop drinking 2 hours before your arrival time.

- Water.
- Clear apple juice, clear grape juice, or clear cranberry juice.
- Gatorade or Powerade.
- Black coffee or plain tea. It's OK to add sugar. Do not add anything else.
 - Do not add any amount of any type of milk or creamer. This includes plant-based milks and creamers.
 - Do not add flavored syrup.

If you have diabetes, pay attention to the amount of sugar in your drinks. It will be easier to control your blood sugar levels if you include sugar-free, low-sugar, or no added sugar versions of these drinks.

It's helpful to stay hydrated before surgeries and procedures, so drink if you are thirsty. Do not drink more than you need. You will get intravenous (IV) fluids during your surgery or procedure.



Stop drinking 2 hours before your arrival time. This includes water.

Your healthcare provider may have given you different instructions for when to stop drinking. If so, follow their instructions.

Things to remember

- Take only the medicines you were instructed to take the morning of your procedure with a few sips of water.
- Don't put on any lotion, cream, powder, makeup, perfume, or cologne.
- Remove all jewelry, including body piercings.
- Leave all valuables, such as credit cards and jewelry, at home.
- If you wear contact lenses, wear your glasses instead. If you don't have glasses, bring a case for your contact lenses.

What to bring with you

- A list of the medicines you take at home.
- Your rescue inhaler (such as albuterol for asthma), if you have one.
- A case for your glasses or contacts.
- Your Health Care Proxy form, if you have completed one.

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 67th and East 68th 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.

Visit www.msk.org/parking for parking information and directions to all MSK locations.

What to expect

Once you're in the hospital, you'll be asked to state and spell your name and date of birth many times. This is for your safety. People with the same or a similar name may be having a procedure on the same day.

When it's time for your procedure, you'll get a hospital gown to wear. A nurse will place an intravenous (IV) line in one of your veins, usually in your arm or hand.

During your procedure

You'll get a mouth guard to wear over your teeth to protect them. If you wear dentures, you'll take them out right before your procedure. You'll lie on your back or left side for the procedure. Once you're comfortable, you'll get medicine through your IV that will make you relaxed and sleepy.

First, your doctor will use an endoscope to look into your esophagus. An endoscope is a flexible tube with a camera that goes through your mouth and esophagus. If your doctor sees that your esophagus is narrow, they may need to dilate (widen) it before the stent is placed. This is done with special balloons or soft, flexible, rubber tubes.

When your esophagus is ready, your doctor will place the stent with a fluoroscopy (a real-time x-ray). After the stent is in the right position, they'll remove the balloons or rubber tubes so only the stent is left in place.

After your procedure

When you wake up after your procedure, you'll be in the Post-Anesthesia Care Unit (PACU). You'll get oxygen through a thin tube that rests below your nose called a nasal cannula. A nurse will be monitoring your body temperature, pulse, blood pressure, and oxygen levels.

You'll stay in the PACU until you're fully awake. Once you're awake, your nurse will bring you something to drink. Your doctor will talk with you about your procedure before you

leave the hospital. Your nurse will teach you how to care for yourself at home before you leave the hospital.

Side effects

- You may feel discomfort in your chest after your stent is placed. This is usually described as a feeling of pressure or soreness.
 - If you have pain, take a pain medicine such as acetaminophen (Tylenol®). Your doctor may also prescribe other pain medicine.
 - For some people, the pain is severe. If pain medicines don't help, tell your healthcare provider. You may need to stay in the hospital for pain relief.
- You may have a sore throat for up to 24 hours after your procedure. Try sucking on lozenges and drinking cool liquids to soothe your throat.

At home

You can go back to doing your normal activities (such as driving and going to work) 24 hours after your procedure. Follow the instructions below about eating and drinking during the first 2 days after your procedure.

- On the day of your stent placement, drink liquids. You can also have soup, oatmeal, or cream of wheat, but don't eat any solid food.
- Don't drink alcohol for 24 hours after your procedure.
- 1 day after your procedure, you can begin to eat soft foods.
- 2 days after your procedure, you can eat solid foods.

Eating with an esophageal stent

Follow the instructions below while your esophageal stent is in place.

- When you go back to your normal diet, eat small pieces of food. Always chew them well before swallowing.
- Drink liquid with your meals to help food pass through the stent. Carbonated drinks, such as soda or ginger ale, also help food pass through.
- Always eat in an upright sitting position. Gravity will help food pass through your esophagus and stent.
- You can swallow pills or capsules whole. Drink at least 4 ounces of water after swallowing them.

Preventing reflux

Reflux is a burning or full feeling pushing up from your stomach. Try the following things to prevent reflux:

- Stay in a sitting position for at least 2 hours after each meal.
- Sleep with the head of your bed raised to 30 to 45 degrees. You can use a wedge pillow to raise the head of your bed. You can also use blocks to raise your bed frame at the head end.

When to call your healthcare provider

Call your healthcare provider if you have:

- Chest pain that doesn't get better with medicine.
- Pain when swallowing that lasts for more than 1 day.
- Pain, bloating, or hardness in your abdomen (belly).
- Back or shoulder pain.
- Trouble breathing.
- Black or dark stools (poop).
- Weakness or feel faint.
- Nausea (feeling like you're going to throw up).
- Vomiting (throwing up) or if you vomit blood.
- Chills.
- A fever of 101 °F (38.3 °C) or higher.
- Any problem you didn't expect.
- Any questions or concerns.

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

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

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While we read all feedback, we cannot answer any questions. Please do not write your name or any personal information on this feedback form.

Was this information easy to understand?

Yes

Somewhat

No

What could we have explained better?

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