

Esophageal Cancer: Diagnosis



How is esophageal cancer diagnosed?

If your healthcare provider thinks you have esophageal cancer, tests are done to help diagnose it. Diagnosing this cancer starts with your healthcare provider asking you questions. They will ask you about your health history, symptoms, risk factors, and family history of disease. They will also do a physical exam.

You may be sent to a specialist called a gastroenterologist. This is a healthcare provider with extra training on treating diseases in the digestive system. They will do tests to look at the problem in your esophagus and find out what's causing it.

What tests might I need?

You may have one or more of the following tests:

- **Imaging tests.** These may include:
 - Barium swallow
- **Endoscopy.** This may include:
 - Upper endoscopy, also called an esophagogastroduodenoscopy (EGD)
 - Endoscopic ultrasound
- **Biopsy.** This may be done during an upper endoscopy.

Imaging tests

Barium swallow

For this test, you'll swallow a chalky liquid called barium. Then your healthcare provider will take a series of X-rays of your esophagus. The barium coats the inside of your esophagus. This makes it easier to see it on the X-rays.

The X-rays can show if part of your esophagus is too narrow. Or if it has any other changes in it that might be due to cancer. These may include bumps or masses. A healthcare provider who specializes in X-rays (called a radiologist) looks at the images.

Sometimes this test is done as part of a series of X-rays that includes the stomach and part of the intestine. This is called an upper GI (gastrointestinal) series.

Used alone, a barium swallow can't diagnose cancer. But it can show abnormal areas that might need to be biopsied.

Endoscopy

Upper endoscopy or EGD

Endoscopy is when your healthcare provider uses a thin, flexible, lighted tube with a video camera on the end (endoscope) to look inside your body.

An upper endoscopy is sometimes also called an EGD. During this procedure, your provider looks at the lining of your esophagus. It also can be used to look at your stomach and the first part of your small intestine.

Before the test, your throat will be sprayed with a local anesthetic to numb it. You may also get a sedative to help you relax. Your provider then puts the endoscope in through your mouth. It goes down your throat into your esophagus. Your provider sees pictures on a monitor as the scope is moved in your esophagus. These pictures show any tissue that isn't normal.

An upper endoscopy takes about 30 minutes. You'll need to stay in the testing area for a few hours until the sedative wears off.

This test can be used to find out if you have cancer in the esophagus. It can also show the size of the tumor.

Endoscopic ultrasound

An endoscopic ultrasound can be done through the endoscope during an upper endoscopy. A special probe is put in through the scope. It gives off sound waves at the end of the scope. These help find out how big the tumor is and how far it has grown into tissues near the esophagus. It can also show if nearby lymph nodes are swollen. These are small sacs of immune system cells. When they're swollen, they may contain cancer cells that have spread from where they first started.

Biopsy

Your healthcare provider can also put tools through the endoscope to take out small pieces of tissue for testing. This is called a biopsy. The tissue is sent to a lab. There, it's looked at under a microscope by a special healthcare provider called a pathologist. The pathologist can see if there are cancer cells in the tissue sample. If so, other tests are done to learn more details about the cancer. These include how fast it's growing and if there are certain gene changes in the cancer cells.

Getting your test results

Your healthcare provider will contact you with your test results. Other imaging tests and blood tests will likely be needed if cancer is found. Make sure you understand your results and what happens next.

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