

Patient Information

Pharyngeal Pouch (Zenker's Diverticulum)

What is a Pharyngeal Pouch?

A **pharyngeal pouch**, also known as **Zenker's diverticulum**, is a condition in which a small **outpouching (pocket)** forms in the wall of the **upper throat**, just above the oesophagus (food pipe). It develops in an area where the throat muscles are naturally weaker.

This pouch can collect food or saliva, leading to **swallowing difficulties** and other symptoms.

What Are the Symptoms?

Symptoms often develop gradually and may include:

- **Difficulty swallowing** (especially solids)
- Feeling of food "**sticking**" in the throat
- **Regurgitation** of food, sometimes hours after eating
- **Coughing**, especially when lying down or eating
- **Bad breath** (halitosis)
- **Noisy swallowing**
- **Throat gurgling**
- Unexplained **weight loss** in more severe cases

In some people, the pouch can grow large enough to be felt as a **lump in the neck**.

What Causes It?

The pouch forms because the **cricopharyngeus muscle** (part of the upper oesophageal sphincter) does not relax properly when swallowing. This causes pressure to build up in the throat, leading to a small herniation (pouch) through the muscle wall.

It usually occurs in **older adults**, typically over the age of 60, and is more common in **men**.

Is It Serious?

While not cancerous, a pharyngeal pouch can cause **significant discomfort** and may increase the risk of:

- **Aspiration** (food or liquid entering the airway/lungs)
- **Chest infections**
- **Malnutrition** in severe cases

Rarely, long-standing pouches may develop irritation or inflammation that requires further assessment.

How is it Diagnosed?

Your doctor may arrange tests to confirm the diagnosis, such as:

- **Barium swallow X-ray** – shows the size and shape of the pouch
 - **Flexible nasendoscopy** – a thin camera passed through the nose to view the throat
 - **Endoscopy** – a camera passed into the oesophagus under sedation, sometimes done before surgery
-

What Are the Treatment Options?

Treatment depends on the size of the pouch and severity of symptoms.

1. Observation

If symptoms are mild, no immediate treatment is needed. You may be advised to:

- Eat **soft foods**
- Take **small bites**
- Sit upright while eating and drinking

2. Surgery

If symptoms are bothersome or severe, surgery may be recommended to:

- **Open or remove** the pouch
- Help the cricopharyngeus muscle **relax properly**

Surgical options include:

- **Endoscopic (through the mouth):**
 - Minimally invasive

- Uses a **stapler or laser** to divide the wall between the pouch and oesophagus
- Short recovery time
- **Open surgery (through the neck):**
 - Used if the pouch is large or endoscopic access is not possible
 - May involve **removing the pouch** and cutting the tight muscle

Your surgeon will explain the most suitable option for you.

What is the Recovery Like?

- Most people **go home within 1–2 days** after surgery
 - A **soft diet** is usually advised for a short period
 - **Voice changes**, sore throat, or mild discomfort are common and usually temporary
 - Most patients notice **immediate improvement in swallowing and regurgitation**
-

What Are the Risks?

Surgical treatment is usually safe, but all procedures carry some risks:

- **Bleeding**
 - **Infection**
 - **Leakage** from the surgical site (rare)
 - **Temporary hoarseness** or swallowing changes
 - **Recurrence** of the pouch (uncommon, but possible)
-

When to Seek Medical Advice

Contact your doctor if you experience:

- Ongoing or worsening **swallowing difficulty**
 - **Weight loss**
 - Frequent **coughing** or **chest infections**
 - Regurgitation of undigested food
 - Concerns about food going “down the wrong way”
-

Key Points to Remember

- A pharyngeal pouch is a **pocket in the throat** that can cause swallowing issues and regurgitation.
- It is **not cancer**, but it can be uncomfortable and affect your quality of life.
- Treatment is often **highly effective**, especially with surgery.
- Most people recover well and notice a big improvement in symptoms.

If you're experiencing swallowing problems or regurgitation, speak to your GP or ENT specialist. Early diagnosis and treatment can make a big difference.