

Epipharyngeal Abrasive Therapy (EAT)

Patient Information

What is Epipharyngeal Abrasive Therapy?

Epipharyngeal Abrasive Therapy (EAT) is a procedure used to treat inflammation of the **epipharynx**, also called the **nasopharynx**. This is the area located behind the nasal passages and above the back of the throat.

EAT was developed and has been used primarily in Japan for chronic epipharyngitis. More recently, it has been studied in patients with **Long COVID and other conditions associated with chronic epipharyngeal inflammation**.

The goal of treatment is to mechanically stimulate and treat inflamed tissue in the epipharynx. Published EAT protocols commonly use a dilute **zinc chloride solution**, which has an astringent and local anti-inflammatory effect.

EAT is not a cure for Long COVID, ME/CFS, or other systemic illnesses, and response to treatment varies from person to person.

What is EAT used for?

EAT is used to treat **chronic, low-level inflammation in the epipharynx**, the area at the back of the nose and upper throat. In some patients, persistent inflammation in this region may continue to drive or contribute to symptoms even after the original illness has resolved.

- **Coat-hanger pain** involving the neck, upper shoulders, and base of the skull
- **Ear fullness or pressure**
- **Ringings in the ears (tinnitus)**
- **Head pressure**
- **Post-nasal drip**
- **Voice changes or throat irritation**
- **Brain fog or difficulty thinking clearly**

The purpose of EAT is to directly treat this chronically inflamed tissue rather than only treating the symptoms that may result from it.

How is EAT performed?

A medicated solution is applied to the epipharyngeal tissue using a sterile medical swab.

The swab is carefully passed through the **nasal passage and/or through the mouth to reach the epipharynx**. The surface of the epipharyngeal tissue is then rubbed or gently abraded with the swab.

The procedure is intended to treat the surface of the inflamed tissue rather than simply apply medication to it.

When the epipharyngeal tissue is inflamed, it may be sensitive and may bleed when treated. **A small amount of bleeding during or immediately after EAT can occur and is not unusual.**

The actual treatment generally takes only a few minutes.

What might I feel during EAT?

- Burning, stinging, or pressure behind the nose
- Throat discomfort
- A gagging sensation
- Coughing
- Watery eyes
- Sneezing
- An urge to swallow
- Brief sharp or aching discomfort
- Temporary nasal or throat irritation

The degree of discomfort varies considerably between patients.

Common temporary effects after EAT

- Mild nose or throat soreness
- Burning or irritation in the nasopharynx
- Small amounts of blood in nasal drainage or saliva
- Mild nosebleed
- Increased mucus or postnasal drainage
- Temporary coughing or throat clearing
- Headache
- Temporary fatigue
- Temporary worsening of symptoms following treatment

These symptoms are usually short-lived.

Less common risks and complications

- More significant or prolonged nosebleed
- Mucosal injury or ulceration
- Persistent nasal or throat irritation
- Swelling of the treated tissues
- Infection
- Significant gagging or vomiting

- Dizziness or fainting related to discomfort or an autonomic reflex
- Temporary changes in heart rate or blood pressure associated with autonomic stimulation
- Reaction or sensitivity to medications or solutions used during the procedure

Serious complications appear to be uncommon, but large studies defining the exact complication rates of EAT are not currently available.

What should I expect after treatment?

Minor soreness, irritation, or a small amount of bleeding may occur after the procedure.

Unless instructed otherwise, you may generally return to normal activities after treatment.

Improvement, when it occurs, may require a **series of treatments rather than a single treatment**. The number and frequency of treatments are individualized according to symptoms, examination findings, and response.

When should I contact the clinic?

- Persistent or heavy nasal or throat bleeding
- Difficulty breathing
- Significant swelling of the throat
- Severe or progressively worsening pain
- Fever or symptoms suggesting infection
- Persistent vomiting
- Any severe or unexpected reaction following treatment

For severe difficulty breathing, uncontrolled bleeding, loss of consciousness, or another medical emergency, seek emergency medical care.

Current evidence

EAT has a long history of clinical use in Japan for chronic epipharyngitis. Research evaluating EAT for Long COVID and systemic symptoms is growing, but the evidence remains limited compared with established therapies.

A benefit cannot be guaranteed. Some patients improve, some experience little or no change, and occasionally symptoms may temporarily worsen after treatment.

Questions

Please ask any questions you have about the procedure, expected benefits, alternatives, or potential risks before treatment.

This document provides general information about EAT and does not replace the individualized discussion and procedural consent obtained by your physician.