



PATIENT INFORMATION

Gastroscopy and Colonoscopy

Endoscopy Unit

This information is for patients who are having a colonoscopy and a gastroscopy. It tells you what is involved with these tests and any significant risks, which may occur. The tests will last about 45 minutes and you will normally be able to go home approximately 2 hours later.

Patients Frequently Asked Questions

What is a gastroscopy?

It is an examination of your oesophagus (gullet), stomach and duodenum (the first bend of the small intestine). A thin, flexible tube (gastroscope) is passed through your mouth into your stomach. This allows the endoscopist to see what might be causing your symptoms.

What is a colonoscopy?

A colonoscopy is an examination of your large bowel (colon). A thin, highly flexible tube (colonoscope) is passed gently into your back passage (anus) and manoeuvred around the bowel. This will give the doctor a clear detailed image of your bowel.

What will the examinations involve?

- ❖ The endoscopist doing the examinations will discuss both with you and ask you to sign a consent form confirming that you understand and agree to go ahead with it. You are free to ask for more information at any time.
- ❖ You will need to undress and wear a hospital gown along with a dressing gown. You will be offered disposable shorts to wear.
- ❖ You will receive a sedative and an analgesic injection for the tests, and you may be offered Entonox. You will lie on your left hand side for both procedures. The endoscopist who will insert the gastroscope through your mouth and into

your stomach will perform the gastroscopy. **This is not painful and will not make breathing or swallowing difficult**, but you may feel a little uncomfortable during the test.

- ❖ You will also have a colonoscopy, where the endoscopist will gently insert the endoscope into your anus and up into the bowel. **This test may cause some discomfort** due to the bowel being gently inflated to expand it, so that the lining can be seen clearly. We now use Carbon Dioxide (CO₂) instead of air, to inflate the bowel as this has proven to be much more comfortable.
- ❖ A **biopsy** (a small sample of the bowel lining) may be taken during the colonoscopy to be sent off to the laboratory for further testing. This will not cause you any pain.
- ❖ The nurse will be with you during your test.

How do I prepare for the tests?

If you are diabetic or on Warfarin / Clopidogrel please inform the Endoscopy Unit on (01803) 654864 / 655955.

It is important for these tests that both your stomach and bowel are empty. In order to achieve this please read and follow the instructions below:

One bottle of liquid senna preparation (50mls) and two sachets of Picolax powder are enclosed. Please follow our advice carefully in order to ensure an empty bowel, this will allow a complete examination. When taking these preparations some intestinal cramping is normal. If you feel clammy and faint or if you vomit please take no more preparation and ring the Endoscopy Unit helpline on (01803) 654864 / 655955 or your own GP for advice.

5 days before gastroscopy and colonoscopy

Stop taking any iron tablets or medications to control diarrhoea. You should continue to take any other medication.

3 days before gastroscopy and colonoscopy

Following the advice on the reverse of this form, continue to eat but avoid high-fibre foods and choose low-fibre alternatives.

2 days before gastroscopy and colonoscopy

Continue your low-fibre diet. Drink plenty of fluids.

- ❖ For **morning** appointments: Take the full bottle of senna at **6pm** with a drink of water.

1 day before gastroscopy and colonoscopy

- ❖ For **morning** appointments: Take the first sachet of Picolax at **8am** and the second at **4pm**.

- ❖ For **afternoon** appointments: Take the full bottle of senna with a drink of water at **8am** and then take the first sachet of Picolax at **4pm** (you will take your second sachet tomorrow morning).

Stir the contents of the sachet into a cup or glass of cold water. Once dissolved, drink, followed by a litre of clear fluid over the next 2 hours. Following this you will experience a period of frequent bowel actions and diarrhoea. You may find that applying a small amount of Vaseline / Sudocreme to your back passage (anus), prevents discomfort during the bowel preparation.

Stop all solid food **24 hours** prior to your appointment time. For example, if your appointment is at 10.30am stop eating at 10.30am today.

It is essential that you drink plenty of fluids to avoid becoming dehydrated, right up until 2 hours before your appointment time.

The day of your colonoscopy and gastroscopy

For **afternoon** appointments: **Take the second sachet of Picolax at 8am.**

Please continue to drink plenty of water / clear sugary drinks (lemonade, etc) until 2 hours before your appointment time.

Suitable clear fluids

Black tea/Coffee	Apple juice	Honey and lemon
Lucozade	Cranberry/pomegranate	Oxo/Marmite/Bovril
Fruit/herbal teas	Grape juice (white)	Beer/white wine/spirits (in moderation as you are not eating)
All fizzy drinks	All squashes	

You may find this information helpful in choosing your diet before commencing fluids only:

Choose	Avoid
Cereals: Cornflakes, Rice Crispies, Ricles, Sugar Puffs, Coco Pops	Wheat Bran, All Bran, Weetabix, Shredded Wheat, Oat Bran, Branflakes, Wheatflakes, Muesli, Ready Brek, Porridge
White bread (you may use butter / margarine)	Wholemeal, high-fibre white, soft grain or granary bread, oatbread
White pasta, white rice	Wholemeal pasta, brown rice
White flour	Wholemeal or granary flour, wheatgerm
Potatoes (no skin)	Fruit and vegetables
Savouries: Chicken, turkey, fish, cheese and eggs	All red meats
Puddings, pastries, cakes, etc:	Those containing wholemeal flour,

Milk puddings, mousse, jelly (not red), sponge cakes, madeira cake, Rich Tea, Marie or wafer biscuits	oatmeal, nuts, dried fruit, etc. Fruit cake, Ryvita, Digestives or Hobnob biscuits
Preserve and sweets: Sugar, jelly jam, jelly marmalade, honey, syrup, lemon curd. Fruit Pastilles, Wine Gums, Jelly Babies	Jam or marmalade with pips, skins and seeds, sweets and chocolates containing nuts and / fruit Muesli bars
Soups: Clear or sieved soups	Chunky vegetable, lentil or bean soups.
Miscellaneous: Salt, pepper, vinegar, mustard, gelatine, salad cream, mayonnaise	Nuts, Quorn, fresh ground peppercorns, houmous

What will happen when I arrive?

An endoscopy nurse will care for you from your arrival through to your discharge from the Unit. The nurse will explain the test to you and check your details including blood pressure and pulse.

Jewellery and decorative piercing should ideally be removed. If you cannot remove your jewellery, it can be covered with tape, but please inform us when you see the nurse on the day of your procedure. Please inform us also of any coloured tattoos.

What happens after the examination?

- ❖ You will be able to get dressed straight after the test.
- ❖ Your nurse will speak to you after the test but biopsy results will be reviewed within a few days. Please call your GP's surgery for your results in approximately 3 weeks.
- ❖ You will be offered some refreshment and be discharged home as soon as you are ready to go.
- ❖ You will be given a copy of your report, which we will also send on to your GP.

How will I feel when I go home?

- ❖ You may have some abdominal discomfort for the rest of the day in the form of wind, bloating and maybe a little bleeding but this will pass.
- ❖ You may have a mild sore throat, this will soon pass and is nothing to worry about.
- ❖ You may eat and drink as normal when you leave the unit.

About sedation

A small plastic tube (cannula) will be placed in a vein in your arm in order to give you a sedative and a painkiller. This will be done just before the test starts.

Benefits

You will feel relaxed during the test and may or may not remember much about it.

Drawbacks

Sedation takes up to 24 hours to wear off and during this time you are **not safe to:**

- ❖ **Drive a vehicle or operate machinery**
- ❖ **Drink alcohol**
- ❖ **Sign legal documents or make important decisions**

It is not suitable for everybody as it can have adverse effects.

It is very important that you are not alone during the 12 hour recovery period, and that you do not use public transport, but are collected from the unit.

Are there any risks?

These examinations are very safe, however, there is a small risk of:

Colonoscopy

- ❖ **Peritonitis:** It is possible to damage the large bowel lining by making a small hole. This allows bowel contents to escape so causing inflammation in the abdomen (peritonitis). An operation is nearly always required to repair the hole. The risk of this happening is approx 1 in every 1000 tests.
- ❖ **Bleeding:** If a polyp is found, this will need to be removed, as some polyps can become cancerous if not treated. Removing them eliminates this risk. Polyps are removed using a small electrical current to burn through the base and separate it from the bowel wall. When polyps are removed, there is a small risk of bleeding, approximately 1 in every 150. Bleeding can occur up to 7-10 days after polyp removal. Bleeding often settles without treatment, but if it continues it may be necessary to return to the hospital for reassessment.

Gastroscopy

- ❖ **Damage** to dental bridgework, loose or crowned teeth.
- ❖ **Perforation:** This is a tiny tear in the gullet or stomach, which could need repair by surgery (the risk is less than 1 in 1000).
- ❖ **Bleeding:** A small amount of bleeding happens rarely following biopsy.

Please speak to the endoscopist before the examination if you have any worries about these risks.

Useful contacts

If you have any further questions or concerns, please contact:

The Endoscopy Unit
☎ **Tel (01803) 654864/655955**
(8.00am - 5.00 pm, Monday to Friday)

If you have any urgent concerns outside of these hours
please phone the switchboard
☎ **Tel (01803) 614567**
and ask for bleep no **110**

