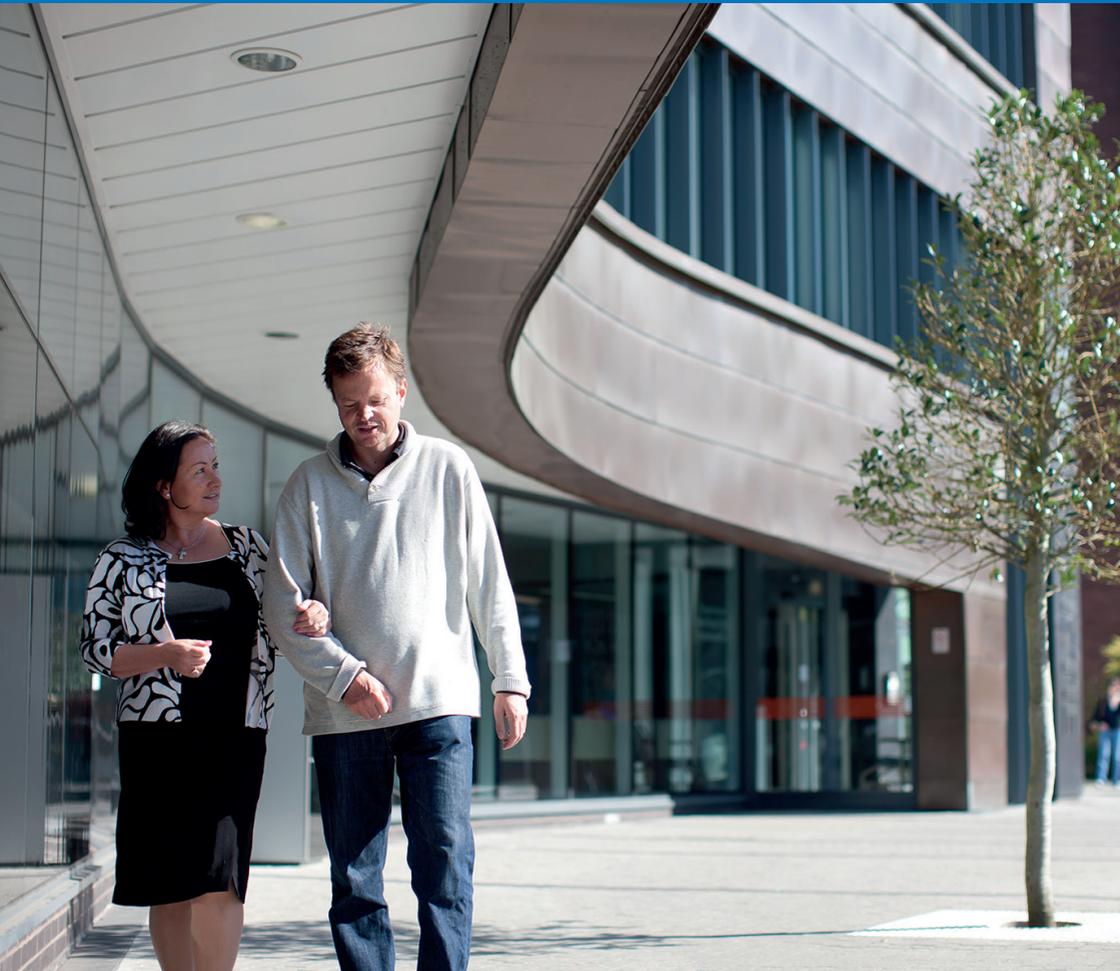




Having a combined gastroscopy and colonoscopy

A guide for patients and their carers



Your information checklist: colonoscopy

It is very important that you read this booklet. If you need further information please do not hesitate to contact the department – you will find a phone number at the end of this booklet.

Please tick the following and sign below:

I have read this booklet Yes No

I understand the information it contains Yes No

I am aware that biopsies may be taken or polyps may be removed during this test Yes No

I am aware of the risk of bleeding and/or perforation Yes No

I am aware that I will have the opportunity to ask further questions when I attend for my appointment.

The combined gastroscopy and colonoscopy can be carried out under sedation. This is given by injections and it will make you feel sleepy and relaxed, although you may not be completely asleep.

However, you do have the option to have the procedures carried out without sedation. If you choose not to have sedation, then you do have the option of having gas and air for the colonoscopy.

Signed

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Christie website

For more information about The Christie and our services, please visit **www.christie.nhs.uk** or visit the cancer information centres at Withington, Oldham or Salford.

Welcome to the integrated procedures unit

Your doctor has recommended that you have a gastroscopy and a colonoscopy. This involves two procedures, one to look at the lining of your stomach and the second to look at the lining of your large bowel.

We want to make you as comfortable as possible during your stay. We have written this booklet to answer the commonly asked questions about gastroscopy and colonoscopy. If you have more questions, or if there is anything that you do not understand, please ask when you attend for the procedures.

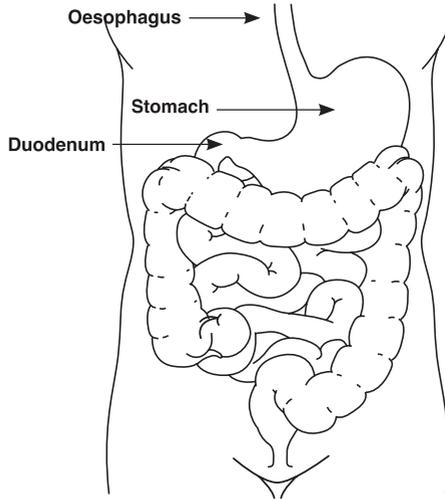
When you arrive at The Christie please report to the integrated procedures unit (IPU), department 2.

Your stay on the unit will usually be for a couple of hours. Sometimes you may need to be here longer if the department is very busy, so it is better for you to put aside the whole morning or afternoon. Please plan to arrive at the IPU no more than 15 minutes before your appointment time.

If you are having an injection to sedate you (to make you sleepy) and usually a painkiller, you will need to have a responsible adult to accompany you and stay with you for 24 hours after the test.

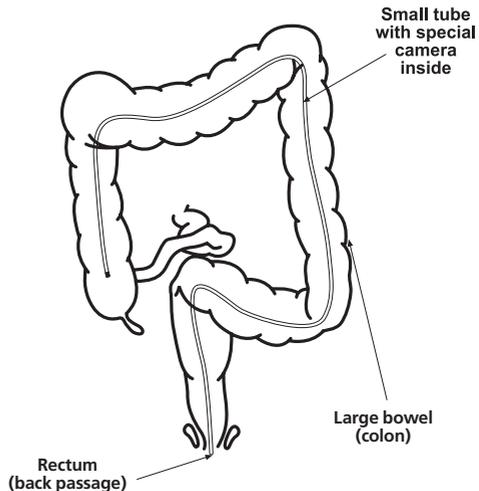
What is a gastroscopy?

A gastroscopy is a procedure using a special tube to look at the lining of your gullet (oesophagus), your stomach and first part of the intestine (duodenum).



What is a colonoscopy?

A colonoscopy is a procedure to look at the lining of the back passage (rectum) and large bowel (colon). The bowel is a large tube with bends in it. A small flexible tube, about as thick as your finger, will be passed into your back passage to look at the inside lining of your bowel. Some air will be put into your bowel during the examination, to make it easier to see the lining.



Why do I need a gastroscopy and colonoscopy?

The procedures may help to find the cause of your symptoms or even to treat them. Samples (biopsies) may be taken during your gastroscopy and colonoscopy to obtain exact information about any abnormality seen. Small lesions or polyps can be completely removed, and if you have haemorrhoids (piles), these can often be treated at the same time.

What is the benefit of a gastroscopy and colonoscopy?

The main benefit of a gastroscopy or colonoscopy is that they are simple, quick tests which are helpful in reaching a diagnosis. They can also be used as a way of delivering treatment. The main benefit of a gastroscopy or colonoscopy is that it helps to plan the best treatment for you.

Are there any alternatives to a gastroscopy or colonoscopy?

An alternative to a gastroscopy could be a barium swallow or a barium meal X-ray. These tests are frequently less accurate than a gastroscopy. An alternative to a colonoscopy could be a CT colonogram and a flexible sigmoidoscopy. This depends on the reasons for your examination. The doctor will discuss this with you.

What happens if I decide not to have a gastroscopy or colonoscopy?

The symptoms may persist and it may be hard to reach a diagnosis.

Is gastroscopy safe?

It is a very safe procedure. The commonest side effect is a sore throat. Serious complications, such as bleeding or damage to the gullet are rare (less than 1 in 1,000 gastroscopies). There is a slight risk to crowned teeth or bridgework.

The doctor will discuss these with you when you arrive at hospital.

Is colonoscopy safe?

Colonoscopy and biopsy is a safe procedure, but there is a very small chance (1 in 1,000) of damaging the bowel during the test, particularly if you have a biopsy or a polyp removed. If this happens it is sometimes necessary to repair it with an operation.

If polyps or haemorrhoids have been treated, some bleeding can occur. The most common side effect is bloating and flatulence, because of the air which is pumped into the bowel.

Although complications of colonoscopy and biopsy are rare, contact us if you notice any of these symptoms in the 48 hours after the test:

- severe abdominal pains
- bleeding from the back passage that is persistent or severe including blood clots

Contact

- the integrated procedures unit (department 2) on **0161 918 2420**
- out of hours (7:30pm to 7:30am) – ring the surgical oncology unit on **0161 446 3860**

What must I do before my procedures?

Bowel preparation

It is important that your bowel is empty so that we can get a clear view of the lining of your bowel wall. We will give you separate information with instructions, follow this very carefully as good bowel preparation will help the doctor or nurse practitioner to get a better view.

If you are diabetic, we will send you specific instructions about taking your bowel preparation.

If you are on Warfarin, Clopidogrel or any other medication to thin your blood, or if you are diabetic, please contact us as soon as possible on **0161 918 2420**.

Preparation for the colonoscopy and gastroscopy

To examine your bowel properly, it must be clean and free from faeces (motion/stools). To do this you must change your diet and take a laxative to produce loose motions and diarrhoea.

7 days before your tests

- stop taking iron tablets

3 days before your tests

- do not eat bran or high fibre foods

The day before your tests

You will take a strong laxative which will cause diarrhoea and empty the bowel. It is wise to stay close to a toilet once you have taken this medicine. Avoid travelling or going to work.

Do not eat or take non clear fluids once you have taken the bowel preparation medication.

The day of the tests

- You may have **clear** liquids up to 2 hours before your procedures
- Do take your tablets and medicines as usual on the morning of your procedures

Should I take my usual tablets or medicines?

Take your prescribed tablets as usual but:

- stop taking iron tablets 7 days before your test
- **if you take Warfarin, Clopidogrel or any other medication to thin your blood, please let the doctor or nurse know as soon as possible.**

Please phone **0161 918 2420**

Please let us know if you have any of the following as we may need to make special arrangements:

- diabetes
- glaucoma
- had a heart attack in the last 6 months
- waiting for heart surgery
- waiting for coronary angioplasty
- a pacemaker/defibrillator
- any allergies
- ever had a reaction to an anaesthetic or medication

What happens before my gastroscopy and colonoscopy?

The doctor doing the procedures will discuss the procedure with you. When you feel all your questions have been answered, the doctor will ask for your written consent to proceed. Please remind them if you are allergic to anything.

Will I feel anything during the gastroscopy?

The procedure is performed using either anaesthetic spray to numb your throat or an injection into a vein to make you sleepy (sedation). Your doctor will help you decide which is best for you.

Anaesthetic spray

- allows you to stay awake, enabling you to talk to the doctor about the results immediately after the gastroscopy and allows you to recover quickly
- you will be aware of the procedure being performed

Sedation (injection)

- may make you drowsy
- may make you unable to remember the procedure
- may make you less anxious
- you will take longer to recover if sedation is given
- you will not be able to drive home after sedation
- you will need an adult to accompany you when you go home after sedation
- for a morning procedure an adult must stay with you until early evening
- for an afternoon procedure an adult must stay with you overnight

What happens during the gastroscopy?

The doctor will discuss this with you before starting. If you have sedation, a small needle will be put in a vein in your hand or arm and oxygen will be given through a tube under your nose. If you are not having sedation, the doctor will apply the throat spray before the procedure begins. A plastic mouth guard will be placed between your teeth and the gastroscopy tube passed into your mouth and down into the stomach. This may be a little uncomfortable but should not make it difficult to breathe. The test usually takes only a couple of minutes. Samples (biopsies) are sometimes taken from the oesophagus, stomach or duodenum during the procedure. This is not painful.

Will I feel anything during the colonoscopy?

The doctor or nurse practitioner will give you an injection to sedate you. It will make you feel sleepy and relax you, although you may not be completely asleep. The sedation can sometimes stop you remembering the test itself. You will need to stay in the department until the sedation has completely worn off. The test takes about 30 to 40 minutes. You may feel some bloating or stomach cramps because of the air that is put into your bowel but these will go when the air is let out after your examination.

What happens during the colonoscopy?

The examination can only be carried out if you have taken the bowel preparation the day before.

The examination will usually take about 30 to 40 minutes.

- The nurse will ask you to put on a gown and to lie in a comfortable position on your left side.

- The doctor or nurse practitioner will give you an injection with a painkiller to make you sleepy, usually into a vein in your hand or arm.
- The doctor will pass a colonoscope (small tube) into your back passage and air will be put gently into your bowel.
- You may feel that you want to go to the toilet, but because the bowel is empty there is no danger of this happening.
- You may pass small amounts of wind. Don't be embarrassed, this is common.

The doctor or nurse practitioner will be looking for any signs of cancer or any area that looks different from the rest of the bowel. If any are found, they will take a biopsy (sample) of the lining of the bowel to examine under a microscope. Sometimes polyps are found. Polyps are small growths that develop from the lining of the bowel. Some polyps need to be removed and it is usually possible to do this at the same time as your test. After your procedure the doctor or nurse practitioner will talk to you about the examination and about what will happen next. It is possible that because of the injection, you may not remember all the details of what you are told.

If you wish, ask the doctor or nurse to speak to whoever is accompanying you.

What happens after the procedures?

- You will be taken to a recovery area.
- The staff will monitor you until you are fully awake. You can then go home with a responsible adult in a car or taxi.
- The nursing staff will tell you when you can eat and drink.

- If you need any follow up, we will send you an appointment through the post.

How long will I be in the hospital?

Please allow for a half a day stay. We will do everything possible to keep your stay as short as possible. Patients not having sedation usually have a shorter stay.

When you go home

If you had sedation for your tests you must not:

- travel home on public transport
- drive or operate machinery for 24 hours after the test
- be left alone to care for small children for 24 hours after the test
- sign legal documents for 24 hours
- drink alcohol for 24 hours
- return to work for 24 hours after the test. If you have a colonoscopy in the afternoon you should not return to work until the second day after your test.
- avoid food and drinks for the rest of the day if your throat is sore. Sore throat and mild upper abdominal discomfort are common for some hours after the tests.

If you have more severe symptoms please contact:

- the integrated procedures unit (department 2) on **0161 918 2420** between 7:30am and 7:30pm or
- out of hours (7:30pm to 7:30am) – ring the surgical oncology unit on **0161 446 3860**.

We will do our best to make your endoscopy as comfortable and stress free as possible. If you need more information or have suggestions about the care you have received, please call us on **0161 918 2420**.

Student training

The Christie is a training hospital for postgraduate and undergraduate trainees so you may meet students in all areas of the hospital. We train doctors, nurses, radiographers and other therapists in the treatment and care of cancer patients.

Placements at The Christie are an important part of student training, so by allowing them to assist in your care, you will be making a valuable contribution to student education.

Students are always supervised by fully qualified staff. However, you have the right to decide if students can take part in your care. If you prefer them not to, please tell the doctor, nurse, radiographer or other therapist in charge as soon as possible. You have a right to do this and your treatment will not be affected in any way.

We also try to respect the concerns of patients in relation to the gender of their doctor and other health professionals.

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

The Christie is committed to producing high quality, evidence based information for patients. Our patient information adheres to the principles and quality statements of the Information Standard.

If you would like to have details about the sources used please contact the-christie.patient.information@nhs.net

Contact The Christie Hotline for
urgent support and specialist advice

The Christie Hotline: 0161 446 3658

Open 24 hours a day, 7 days a week

Visit the Cancer Information Centre

The Christie at Withington **0161 446 8100**

The Christie at Oldham **0161 918 7745**

The Christie at Salford **0161 918 7804**

Open Monday to Friday, 10am – 4pm.

Opening times can vary, please ring to check
before making a special journey.

The Christie NHS Foundation Trust

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www.christie.nhs.uk



The Christie Patient Information Service
July 2020– Review July 2023

CHR/SUR/1398/23.06.20 Version 1