Consultant Gastroenterologist

Your Colonoscopy

A colonoscopy is an examination to look at the lining of your large bowel. A small flexible tube will be passed through your back passage into your large bowel so we can look at the bowel. The bowel is inflated with air to make it easier to see the lining.

Why do I need it?

You may have symptoms that point to your large bowel being the cause of your condition. Or we may need to rule out that it is your bowel causing the problems. We need to do this test to find out what is going on.

Colonoscopy can be useful to diagnose many conditions of the bowel, for example:

- Inflammatory Bowel Disease
- Diverticular Disease
- Polyps
- Colorectal Cancer

During the procedure, a small pinch of tissue (biopsy) may be taken. The tissue is removed painlessly by using tiny forceps which are passed through the endoscope. Sometimes polyps (small growths) are found; these can usually be removed during the procedure.

How long will the procedure take?

It can vary from 30 to 50 minutes.

Does it hurt?

You may feel some bloating or stomach cramps because of the air that is put into your bowel. This discomfort should begin to settle once the procedure is finished.

What are the risks?

Colonoscopy is generally a very safe procedure, but as with all medical procedures there are some risks involved. In addition, it may not always be possible to complete

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the procedure. You should be aware that no test is 100% accurate and abnormalities may be missed, including cancers.

It must be stressed that these complications are rare but if they occur they may require urgent treatment.

• Tear or perforation:

The main risk of this procedure is causing a tear or hole (perforation) of the bowel wall. This is rare, about 1 in 1,000. It is generally recognised whilst you are still in hospital. If this happens it may be necessary to repair the bowel with an operation.

Bleeding:

Bleeding can occur from polyps or from biopsy sites. A small amount is normal if you have had biopsies taken and is usually insignificant. You may not notice it.

Sometimes it may need more urgent treatment, such as a blood transfusion or operation. Again, the risk is about 1in1,000.

Other rare complications include reactions to medications:

Some people tolerate this procedure well with no sedation. If, however, you feel you would like sedation, it is given as an injection into a vein in your hand or arm. This is not like a general anaesthetic. It can make you feel drowsy and relax you.

There is a small risk that sedation may affect your breathing. We aim to reduce this risk by assessing your general health before the endoscopy and you will be closely monitored by qualified nurses during and after the examination. You will also be given extra oxygen during the procedure. In a small number of cases faecal soiling may occur directly following the test. If this happens a nurse will assist you with your hygiene needs.

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What preparation will I need?

To have a successful examination of your bowel you must ensure your bowel is empty and clean. The following pages contain the instructions that you will need to follow before the procedure to ensure your bowel is empty. They advise you on some simple dietary changes you will need to make, as well as instructions on how to take the bowel preparation you have been sent.

Please note the time of your procedure as bowel preparation instructions are different for morning and afternoon appointments.

Moviprep is a strong laxative that will cause diarrhoea and empty the bowel. It is wise to stay within easy reach of a toilet once you have taken this medication. Avoid travelling or going to work.

You may find that your bottom feels sore with having to go to the toilet so often. Putting Sudocrem or Vaseline around the irritated area might help.

Moviprep can cause abdominal pain, bloating, tiredness, feeling generally unwell, soreness around the anus, headaches, nausea and vomiting. If you experience any of these side-effects, try taking the Moviprep more slowly.

People are rarely allergic to Moviprep. They may experience a rash or itching, swelling of the face or ankles, palpitations or shortness of breath. If any of the side-effects become serious, stop taking Moviprep and seek medical advice.

If you are taking any other medication, please take them at least one hour before or one hour after taking the Moviprep, otherwise they may be flushed through your digestive system and not work so well.

Please remember it is essential to drink plenty – it improves the cleaning quality of Moviprep and ensures you don't get too dehydrated. People who are particularly frail or have other medical conditions such as kidney failure are especially vulnerable to this.

Morning Appointment 08.00-12.30:

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If you have a morning appointment please follow the regimen below:

5 days before	4 days before	3 days before	2 days before	1 day before	Day of procedure
Stop taking Iron (ferrous sulphate), codeine, imodium	Start low fibre diet	Continue low fibre diet	Continue low fibre diet	You must drink plenty of clear fluids	No food Continue to drink plenty of clear fluids
				6pm take Packet 1	5-6am take Packet 2

Drink plenty of fluid throughout the day to avoid becoming dehydrated. Fluids allowed:

- Water or flavoured water
- Soda or tonic water
- Black tea, coffee, herbal or fruit teas
- Diluted fruit squash
- Energy drinks eg lucozade
- You may add sugar to your drinks

You must not have milk or drinks containing milk.

You must not have any fruit juice.

It is advisable not to drink alcohol.

18.00 (6pm): the day before - Mix sachets A and B from the first packet of Moviprep with one litre of water, stir to dissolve. You can flavour it with some squash if you would prefer (not blackcurrant) and chill it in the fridge. Drink a glass at least every

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15 mins until it is finished. Try and finish all of it within two hours. Continue to drink about 2 litres of clear fluid after the first packet to avoid dehydration.

05.00 am: the morning of the procedure - Mix sachets A and B from the second packet of Moviprep with one litre of water, stir to dissolve. Flavour as required or chill it in the fridge. Drink a glass at least every 15 mins until it is finished. Try and finish all of it within two hours. Continue to drink plenty of clear fluids.

Dr Sudeep Tanwar PhD FRCP Consultant Gastroenterologist Afternoon Appointment 13.00-17.00:

If you have an afternoon appointment please follow the regimen below:

5 days before	4 days before	3 days before	2 days before	1 day before	Day of procedure
Stop taking Iron (ferrous sulphate), codeine, imodium	Start low fibre diet	Continue low fibre diet	Continue low fibre diet	You must drink plenty of clear fluids	No food Continue to drink plenty of clear fluids
				8pm take Packet 1	8am take Packet 2

Drink plenty of fluid throughout the day to avoid becoming dehydrated. Fluids allowed:

- Water or flavoured water
- Soda or tonic water
- Black tea, coffee, herbal or fruit teas
- Diluted fruit squash
- Energy drinks eg lucozade
- You may add sugar to your drinks

You must not have milk or drinks containing milk & you must not have any fruit juice.

It is advisable not to drink alcohol.

20.00 (8pm): the day before – Mix sachets A and B from the first packet of Moviprep with one litre of water, stir to dissolve. You can flavour it with some squash if you

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would prefer (not blackcurrant) and chill it in the fridge. Drink a glass at least every 15 mins until it is finished. Try and finish all of it within two hours. Continue to drink about 2 litres of clear fluid after the second packet to avoid dehydration

08.00 am: the morning of the procedure - Mix sachets A and B from the second packet of Moviprep with one litre of water, stir to dissolve. Flavour as required or chill it in the fridge. Drink a

glass at least every 15 mins until it is finished. Try and finish all of it within two hours. Continue to drink plenty of clear fluids up until one hour before procedure.

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Advice for insulin or tablet-controlled diabetic colonoscopy patients

(There are no special instructions for you if your diabetes is controlled by diet alone).

The necessary change in your diet may upset your diabetes. However, do not worry, as this will not cause any long-term harm. It is important that you continue to take your medication until the day of the procedure.

On the day before and the day of the colonoscopy you will need to monitor your blood sugar levels more frequently than you normally would throughout the day.

If you feel your blood sugar levels are lower than normal you should have a sugary drink or take glucose tablets.

On arrival at the unit, the nursing staff will check your blood sugar.

On the day of the colonoscopy:

If you are diabetic do not take your morning dose of insulin or tablets. Bring them with you, as you will be able to take them after the procedure. Continue to monitor your blood sugar levels.

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What happens after the procedure?

You will be returned to the ward to recover. If you have not had sedation you will be able to get dressed, have a cup of tea or coffee and be discharged.

If you have sedation you must have an escort to take you home. You must not:

- Drive yourself home or travel home on public transport
- Operate machinery 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

How will I know the results of the test?

After the procedure you will receive all the results available to Dr Tanwar but biopsy results will take at least 7 days.

Before you are discharged you will usually get a copy of your report. You can book an appointment with your GP at a later date to discuss your results if necessary.

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Dietary advice for low fibre diet

Food	Foods allowed	Foods NOT allowed
Fish	All white fish with no skin or	Canned fish, fried fish,
	bone	kippers, shellfish
Meat	All lean cuts of meat with no	Sausages, meat pies, salami,
	skin eg chicken, beef	pate, pork pies, fatty meats
Dairy products	Cheese, cream cheese,	Fruit yoghurts, full fat milk,
	cottage cheese, cheese sauce,	cream, butter
	skimmed or semi-skimmed	
	milk, margarine / low fat	
	spread, eggs	
Vegetables and	Potatoes – boiled or mashed	No other vegetables or pulses
pulses	with no skin. Oven chips only	are allowed, no fried chips
Bread	White bread only, fresh or	No wholemeal, granary or
	toasted	high fibre white bread
Soup	Stock-based soup (clear)	No vegetable, lentil or "cream
•		of" soups
Pasta	All white pasta eg macaroni,	Brown rice, brown or
	spaghetti, white rice or noodles	wholemeal / coloured pasta
Cereals	None allowed	None allowed
Fruit and nuts	None allowed	None allowed
Biscuits	Rich tea or plain biscuits	All other biscuits and crackers
Desserts	Plain jelly (not purple or red),	All other desserts, milk
	meringues	puddings, pastries, fruit /
	_	carrot cake, ice cream
Preserves	Honey and syrup	All jams, marmalades
Confectionary	Boiled sweets	All chocolate
Drinks	Tea, coffee, lucozade, oxo,	All fruit juice
	Bovril, fruit squash	