

Endoscopy Unit

GASTROSCOPY

THIS PROCEDURE REQUIRES YOU TO FAST AND STOP SOME MEDICATIONS FOR 14 DAYS BEFORE YOUR PROCEDURE.

This document contains essential information about your upcoming investigation and should be read IMMEDIATELY.

Please contact the nurse helpline if you:

- **May be pregnant**
- **Have a pacemaker**
- **Have an implantable cardiac defibrillator**
- **Take Warfarin, Rivaroxaban, Apixaban, Edoxaban or Dabigatran**
- **Have a stoma**

Endoscopy Nurses: 020 8934 6614 (2 P.M. – 4 P.M. ONLY)

**Endoscopy Bookings Team (To Reschedule or Cancel Appointments):
020 8934 2099 option 2 (9AM – 5PM ONLY)**

We strongly advise to read carefully this information leaflet BEFORE calling the advice line. The answers to your questions may already be contained here.

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GASTROSCOPY

We will be happy to answer any questions when you come for your appointment, if you wish to discuss any aspect of your clinical care in private then please ask.

We always endeavour to see you close to your appointment time to minimise any delays. However, this may not always be possible. We will keep you informed of any significant delays. **Please allow up to 3 hours in total for your visit.**

The procedure will be performed by or under the supervision of a Consultant/Nurse Endoscopist.

WHAT IS GASTROSCOPY?

It is a procedure that first pass through the mouth to look directly at the lining of the oesophagus (gullet), the stomach and the duodenum (the first bend of the small intestine), using a flexible telescope. (See **Figure 1**) It is useful for diagnosing a range of gastrointestinal conditions.

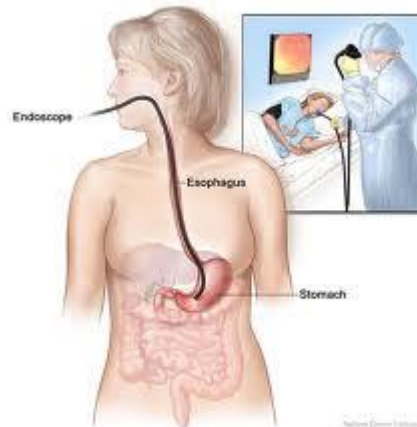


Figure 1

ALTERNATIVE INVESTIGATIONS

Alternative investigations are possible using radiology e.g., barium studies or CT scans, however these can be less sensitive and have the disadvantage that biopsies cannot be taken for further investigation. If an abnormality is found using radiology investigations a subsequent investigation with gastroscopy may be required.

RISKS

The investigation is safe, but there are some risks with this test. These include:

- Damage to teeth or dental work
- Intravenous sedatives can affect your breathing, heart rate and blood pressure; these problems are normally short lived and easily managed by the endoscopy unit staff. Rarely, these complications are more serious, and may need more intensive management.
- The gastroscope may cause damage known as a perforation (a tear/hole in the lining of the gullet, stomach or duodenum). The risk of this is approximately 1:3,000 procedures. This is a serious complication and typically requires an operation to repair.

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- Bleeding may occur following a biopsy.
- There is a small risk of developing a chest infection or pneumonia following a gastroscopy - this occurs mainly if there is food or fluid in the stomach, it is important to follow the fasting instructions before the procedure.

PREPARING FOR YOUR GASTROSCOPY

14 days before the procedure	ACTIONS
If you are taking: <ul style="list-style-type: none"> • Omeprazole • Lansoprazole • Esomeprazole • Pantoprazole • Rabeprazole 	<ul style="list-style-type: none"> • Stop this medication 2 weeks (14 days) before your appointment unless your doctor has advised otherwise. • If you are known to have Barrett's Oesophagus or if you're having this procedure again (Repeat Gastroscopy) to follow up ulceration healing. Please DO NOT STOP taking these medications.

Occasionally these tests are booked at short notice.

If you do not have time to stop these meds (listed above) for 14 days because you received the appointment letter at short notice by post or phone call, please STOP this medication as soon as you receive your appointment date.

It is appreciated that some patients will find it difficult to stop this medication, and may be reluctant to do so. You may take Rennie's and Gaviscon.

Warfarin

- If you take **WARFARIN**, this may need to be stopped before your Gastroscopy. You will be referred to the anti-coagulation clinic at Kingston Hospital, if required. They will make the necessary arrangements for you. If you have not heard from them 7 days before your Gastroscopy is due, please contact them on **020 8934 2030/ 2041/ 3689/ 2321 option 5**.
- Please note that interrupting your anticoagulation therapy may carry a slightly increased risk of a clot forming. (You can discuss with the anticoagulation nurse on **020 8934 3576**). **DO NOT STOP WARFARIN WITHOUT MEDICAL ADVICE.**
- If you take Warfarin, we will check your **INR** with a finger prick test before your procedure.
- If you take any OTHER blood thinning medication such as Rivaroxaban, Apixaban, Edoxaban or Dabigatran, please contact the endoscopy unit 020 8934 6614, If you have not been given advice regarding this. It is very important that you **do not stop these medications without medical advice.**

Diabetes

- If you have diabetes, it may be necessary to adjust your treatment whilst preparing for this test. Please discuss this with your GP or Diabetes Nurse specialist at least 3 days before your test. **Please see separate sheet for Diabetes leaflet.**
- If you take **Insulin**, you should have an early morning appointment, **IF NOT SO**, please contact the booking team to re-schedule. Adjust your Insulin dosage accordingly before your procedure. **Please see separate sheet for Diabetes leaflet.**

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FASTING PREPARATION

GENERAL RULE BEFORE YOUR GASTROSCOPY APPOINTMENT TIME:	
Six (6) Hours before:	<i>You may have a light meal or food.</i>
Four (4) Hours before:	<i>Stop all fluids, only a Glass of water is allowed.</i>
Two (2) Hours before:	<i>Only tiny sips of water are allowed.</i>
YOU MUST NOT HAVE ANYTHING BY MOUTH BEYOND 2 HOURS BEFORE YOUR APPOINTMENT TIME!	

Prescribed Medication

- Please take your **OTHER** regular medications with a sip of water (up to 2 hours before your test), unless advised not to.
- **BRING A LIST OF YOUR CURRENT MEDICATIONS.** If you use asthma inhalers or angina sprays, it is important to bring these with you.

On arrival at the hospital

- Your details, blood pressure and pulse will be checked by your nurse.
- You will be asked to remove spectacles, contact lenses or dentures just before the investigation - **ideally leave jewellery and valuables at home.**
- The Endoscopist will see you before your investigation to discuss and sign the legal consent form

During the procedure

- Your blood pressure, heart rate and oxygen levels will be monitored through probe attached to your finger or ear.
- You may be given oxygen via a small sponge in your nostril.
- You will lay on your left side for the procedure.
- You will be given a small plastic mouth guard to bite on. The Endoscopist will insert the gastroscopy through this into your mouth and down into your stomach and duodenum. This is not painful and will not make breathing or swallowing difficult, but it can feel uncomfortable and unpleasant.
- Air will be passed into your stomach this may make you feel bloated. Most of the air is removed from the stomach at the end of the investigation.
- Biopsies (small samples of tissue), which are painless, may be taken during the investigation to be sent to the laboratory for further tests. Photographs may be taken and kept for your hospital records.
- Polyps (projections of tissue, a bit like warts) may be removed if found.

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Will I Be Awake?

The discomfort experienced during a Gastroscopy varies greatly from person to person.

You will be awake during the procedure. The test is not painful or suffocating but the test may make you want to gag. Some patients do not feel any discomfort; others feel discomfort to the extent that the procedure has to be stopped.

To help minimise discomfort and/ or pain, we offer either: **Local Anaesthetic Throat Spray or an Intravenous Sedation, or both.** A nurse is with you during the Gastroscopy.

- A. **Local Anaesthetic Throat Spray** will numb the back of your throat and numb the nerve-endings that cause gagging. It helps to reduce the sensation of the scope in the throat, although **IT DOES NOT TAKE AWAY ALL THE FEELING AND YOU MAY STILL GAG A LITTLE.**

Following Throat Spray:

- You can usually leave the unit within 10-15 minutes of your procedure.
- You can drink and eat as soon as your swallowing is back to normal, usually within one (1) hour.

THIS IS VERY IMPORTANT:

If you chose an Intravenous Sedation

YOU MUST HAVE A RESPONSIBLE ADULT TO TAKE YOU HOME AND STAY WITH YOU FOR 24 HOURS FOLLOWING INTRAVENOUS SEDATION.

- B. **Intravenous Sedation** (Midazolam) will be given via a cannula in your vein. The sedative makes you feel relaxed and a little drowsy. However, it **DOES NOT 'PUT YOU ASLEEP'**. The Endoscopist measures the dose of the medication according to your response and comfort but is guided by national guidance as to how much of this drug you may safely have. **The Endoscopist CANNOT 'KNOCK YOU OUT.'**

Side effects: Intravenous sedation occasionally cause problems with breathing, heart rate and blood pressure. Normally short lived and can be managed by the endoscopy unit staff. Rarely, these complications are more serious, and may need more intensive management.

Following Intravenous Sedation:

- You must arrange to have a responsible adult to take you home and stay with you for 24 hours.
- You will need to rest on the ward for 30-45 minutes.
- Your escort must be **READILY AVAILABLE** upon us contacting them, please arrange for them to be close to the hospital whilst you are having your procedure, or within 30 minutes travel time. **Nurses on the ward will help you contact your escort as soon as you are back in the recovery area.**
- You may not be allowed to travel by public transport or travel alone in a taxi.
- For 24 hours after the sedative, you CAN NOT drive, return to work, operate machinery (including cookers and kettles), drink alcohol, sign legal documents
- Allow 24 hours to rest before resuming normal activities or work. You CAN NOT be responsible for small children.

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GENERALLY AFTER GASTROSCOPY

- If you had sedation or throat spray with sedation, you will need to rest on the ward for 30-45 minutes.
- After recovery, you can eat and drink as normal or when the throat spray wears off (if you have the throat spray as well).
- You may have a mild sore throat for 24 hours after the test. This is nothing to worry about and will pass.
- You may feel bloated due to air left in the stomach. This will pass naturally.
- Wait for the copy of your report and discharge instructions. A nurse will briefly explain these reports/instructions to you.
- A copy of the report will be sent to your GP and your hospital Consultant (if you have one). Biopsy results will be sent at a later date. Biopsy results can take up to 6 weeks to be processed.
- Please note: it is not possible for patients to access biopsy results from the hospital/endoscopy unit.



CONSENT

This procedure requires your formal consent. This booklet has been written to enable you to make an informed decision about agreeing to the procedure.

The consent form is a legal document, therefore please read this booklet carefully.

If having read this information you do not wish to go ahead with the procedure, or want to consider alternative methods of investigation, **please discuss this with your GP or hospital doctor** as soon as possible **BEFORE THE DATE OF YOUR APPOINTMENT.**

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Useful Contact Numbers:

Endoscopy Nurses: 020 8934 6614 (2PM – 4PM ONLY)

Call for questions relating to your procedure/medication/preparation for your test, which is not included in this leaflet and needs to be answered before you attend your appointment.

Make sure you have your hospital number ready before calling together with your full name and date of birth. Have a pen and paper ready too in case you need to write down information.

To reschedule or cancel appointments.

Your appointment is valuable, if you need to reschedule your appointment, please give as much notice as possible, preferably a minimum of 10 days' notice; this allows us to offer this appointment to another patient.

Please note the booking team cannot answer clinical questions relating to your procedure.

Please Call Endoscopy Bookings Team: **020 8934 2099 option 2 (9AM to 5PM)** or Email khn-tr.endoscopy@nhs.net

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