Gastroscopy - outpatients

This booklet has been written to explain the procedure. This will help you to make an informed decision in relation to consenting to the investigation. Please read the booklets and consent form carefully. You will also need to complete the enclosed health questionnaire.

You may be contacted via the telephone by an endoscopy trained nurse before your procedure to go through the admission process and answer any queries you may have. If you are not contacted please come for your appointment at the time stated on your letter.

If you have any mobility problems or if there is a possibility you could be pregnant please contact the appointments staff on 01284 712748.

Please note your appointment time is your arrival time on the unit, and not the time of your procedure.

Please remember there will be other patients in the unit who may arrive after you, but are taken in for their procedure before you, this is for medical reasons or they are seeing a different doctor.

Due to the limited space available and to maintain other patient’s privacy and dignity, we only allow patients (and carers) through into the ward area. Relatives/escorts will be contacted once the person is ready for collection.

The Endoscopy Unit endeavours to offer single sex facilities, and we aim to make your stay as comfortable and as stress free as possible.

Medication

If you are having a gastroscopy for the first time and you are taking any of the following anti-ulcer medication please stop taking these two weeks before your gastroscopy date:
- Lansoprazole (*Zoton*)
- Omeprazole (*Losec* or *Mepradec*)
- Esomeprazole (*Nexium*)
- Pantoprazole (*Protium*)
- Rabeprazole (*Pariet*)

However, if you are having a repeat gastroscopy procedure it is very important that you **do not stop** these medications prior to the procedure.

*If you are in any doubt whether you should stop or continue your medication please ring 01284 713952.*

- If you are taking **WARFARIN** or other anticoagulant (blood thinning) **medication** please contact the appointment staff on 01284 712748 or your GP or hospital doctor, as special arrangements may be needed.

- **Diabetic patients** should contact their diabetic nurse / GP (have your appointment time and eating plan found at the back of this booklet with you) for advice on adjusting any diabetic medication prior to the procedure.

**What is a gastroscopy?**

This is a procedure that allows the endoscopist to look at your oesophagus, stomach and duodenum. This is done by passing a flexible tube (gastroscope) through your mouth and gently over your tongue to the back of your throat, down into your gullet (oesophagus), stomach and the first part of your small intestine (duodenum). The procedure takes between 5 and 10 minutes.
The gastroscope is connected to a television system and has a mini camera built into the end. Pictures are then seen on a television monitor and photographs may be taken which will be stored in your medical notes. By examining your stomach the cause of your symptoms may be found, sometimes we are able to treat them during the procedure. The procedure usually takes between 5 and 10 minutes.

Why do I need a gastroscopy?

Your doctor is concerned about the symptoms you have been having with your upper digestive system. A gastroscopy is a good way of finding out whether there is a problem or not. It also helps your doctor to decide on further treatment if necessary.

A gastroscopy is used to investigate a variety of symptoms, for example:
- Abdominal pain
- Vomiting / vomiting blood
- Heartburn
- Inability or difficulty swallowing
- Anaemia
- Weight loss
- Passing black motion

Are there alternatives to a gastroscopy?

A gastroscopy is the best way of looking at your oesophagus and your stomach. However, a Barium swallow / meal examination is one possible alternative test. A Barium swallow/meal is an X-ray based test. It does not provide such detailed pictures of your oesophagus and your stomach, and it does not allow treatment to be performed, or biopsies to be taken at the same time. Therefore, you may still need to have a gastroscopy.

If you wish to discuss these alternative tests please contact your GP or hospital doctor.

How do I prepare for the procedure?

It is necessary to have clear views and for this the stomach must be empty.

It is very important that you do NOT eat, drink or take any tablets for at least 6 hours before your appointment or this could lead to the cancellation of your procedure. If your
appointment is in the afternoon or evening please only eat light meals up to six hours before your procedure.

What happens when I arrive?

On arrival, please report to the endoscopy reception where the receptionist will check your personal details; you will be asked to take a seat in the main waiting area until the nurse escorts you through to the admission room.

Because of the limited space available, and to maintain other patient’s privacy and dignity, we only allow patients (and carers) through onto the ward. Relatives / escorts will be contacted once you are ready for collection.

You will be taken into the admission room where a nurse will explain the procedure, ask you about your health, medications and allergies and then take your pulse and blood pressure. If you are a diabetic your blood glucose level will also be recorded.

The nurse will discuss the consent form with you, and will answer any questions that you may have. We want to make sure that you understand the procedure and its implications.

You can expect to be on the unit for 2 – 4 hours.

Medication options for the procedure

For many people a gastroscopy is only minimally uncomfortable and sedation is not required. If you are worried about potential discomfort or would like sedation for other reasons then please ask for it.

There are two options for this procedure:

1. **No sedation option**: We will spray a local anaesthetic to the back of your throat. This will make it numb so that you cannot feel the gastroscope. The numbness will last for about an hour.
   - The advantage is that you can leave as soon as the procedure is finished and you have talked to the nurse. You may resume your normal activities such as working and driving. You will be fully aware of the procedure; most patients find this acceptable.

2. **Intravenous sedation option**: We will give you a sedative through the cannula to make you feel relaxed. The sedative *will not* put you to sleep (this is *not* a general
anaesthetic). This option may take away some of the awareness of the procedure.

- The disadvantages of this option are that you will need a responsible adult to collect you from the unit and stay with you for at least 24 hours. You will not be able to drive yourself home, go back to work, operate machinery, drink alcohol or sign any legal documents for 24 hours following the sedation.

**What does a gastroscopy involve?**

- You will be escorted to the procedure room and introduced to the nurse and endoscopist who will be with you throughout your gastroscopy.

- The endoscopist will check that you have a full understanding of your procedure and all that it means, and that you are willing to go ahead.

- In order to monitor your heart rate and breathing, the nurse looking after you will place a probe onto one of your fingers.

- A nurse will be with you at all times, giving you guidance and support, you will be asked to remove any dentures and glasses. If you have chosen to have throat spray it will be given at this time. You will be asked to lie on your left side, the nurse will place a mouth guard into your mouth to protect your teeth and gums. If you have chosen to have sedation this will be given at this time.

- The gastroscope will then be inserted gently into your mouth and passed over your tongue to the back of your throat. We would like to reassure you that although the test can sometimes be a little uncomfortable it is not painful and you can breathe normally. Any saliva or other secretions produced during the procedure will be removed using a small suction tube, rather like the one used at the dentist.

- The test should take about 5-10 minutes to complete. If small samples of tissue (biopsies) need to be taken, the procedure may take a little longer.

**What is a biopsy?**

A biopsy is a small piece of tissue, which is removed through the gastroscope using tiny forceps. This procedure is painless and you will probably not be aware of it being done.
Are there any risks or complications?

As with every medical procedure the risk must be compared to the benefit of having the procedure carried out. The doctor who has requested the procedure will have considered this very carefully.

Diagnostic gastroscopy procedures carry a very small risk (one in 10,000 cases) of haemorrhage (bleeding) or perforation (tear) of the gut following which surgery may be necessary. There may be a slight risk to teeth, crowns or dental bridgework. You should tell the nurse if you have any of these. Other rare complications include aspiration pneumonia (inflammation of the lungs caused by inhaling or choking on vomit) and an adverse reaction to any medications used.

Like all tests, this procedure will not always show up all abnormalities and, on very rare occasions, a significant abnormality may not be identified. If you have any questions about this please ask either at the time of the procedure or the person who referred you.

After the procedure

We will tell you as much as possible about what was found after the procedure. However biopsy results will take a few weeks to arrive.

Before you are discharged, the nurse will tell you what was seen during your procedure, and what to do next, you will be given a printed sheet with this information on for you to take home.

If you have had throat spray

You will be unable to eat or drink for one hour after your procedure. You will be able to go home shortly after the procedure, or even go back to work or drive if you need to.

If you have had sedation

You will be given time to recover quietly until the immediate effect of sedation has worn off.

You will be offered a drink and something to eat while you wait for your escort home. This person must come to the unit to collect you. You must have supervision by a responsible adult at home for at least 24 hours following sedation.
The sedation lasts longer than you might imagine, so it is very important that after your procedure you do not do any of the following for at least 24 hours:

- Drive a car
- Operate machinery
- Drink alcohol or smoke
- Sign any legal documents

**After you have been discharged**

Serious side effects from this procedure are rare but for the rest of the day you may have a sore throat. You may also feel a little bloated if some air we use in the test has been left behind. Both of these things will pass and need no medication.

If you experience any of the following problems please contact your GP immediately informing them you have had a gastroscopy:

- Severe abdominal pain (not cramp caused by wind)
- A firm and swollen abdomen
- High temperature or feeling feverish
- Vomiting / vomiting blood

If you are unable to contact or speak to a doctor, please ring the Endoscopy Unit during office hours: 8.00am to 9.30pm hours Monday to Thursday and 8.00am to 6.00pm hours on Friday. Telephone number: **01284 713952**.

Out of hours, you can contact West Suffolk Hospital on 01284 713000 and ask to be put through to the **on-call endoscopy nurse for advice**.

Please be advised that patients are unable to donate blood for four months following an examination with a flexible endoscope as directed by the NHS Blood and Transplant Service.

**Summary of important information**

As with every medical procedure the risk must be compared to the benefit of having the procedure carried out. The doctor who has requested the procedure will have considered this very carefully.

However, it is your decision whether you wish to go ahead with the procedure or not and you are free to change your mind at any time.
It is everyone’s aim for you to be seen as soon as possible. However, the unit can be busy and your gastroscopy may be delayed. If emergencies occur, these patients will obviously be given priority over the less urgent cases.

Due to the limited space available and to maintain other patient’s privacy and dignity, we only allow patients (and carers) through into the ward area. Relatives / escorts will be contacted once you are ready for collection.

Please do not bring valuables to the hospital. The hospital cannot accept any responsibility for the loss or damage to personal property during your time on these premises.

Training doctors and other health professionals is essential to the continuation of the National Health Service, and improving the quality of care. Your procedure / treatment may provide an important opportunity for such training under the careful supervision of an experienced endoscopist. You can however, decline to be involved in the formal training of medical and other students; this will not affect your care and treatment.

Checklist

Things to remember before your procedure:

- Read the booklets carefully
- Fill in the health questionnaire
- Do not have anything to eat or drink for at least six hours before your procedure
- Check for specific medication instructions
- Transport arrangements made if you are having sedation

Bring this booklet, health questionnaire and consent form with you to the appointment. Do not sign the consent form, but please bring it with you on the day of your appointment.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust

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