

Patient information

Flexible sigmoidoscopy – Outpatients

You have been referred by your doctor to have a flexible sigmoidoscopy. This information booklet has been written to explain the procedure. This will help you to make an informed decision before consenting to the procedure. If you are unable to attend your appointment please inform us as soon as possible **01284 713551**.

Please ensure you read this booklet and the enclosed consent form thoroughly. Please also complete the enclosed health questionnaire.

You may be contacted 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 to your appointment at the time stated in your letter.

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

If you have any mobility issues or if there is a possibility you could be pregnant, please contact the appointment staff on 01284 713551

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

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

Medication

If you are taking **WARFARIN, CLOPIDOGREL, RIVAROXABAN or any other anticoagulant (blood thinning medication)**, please contact the appointment staff on 01284 713551, your GP or anticoagulation nurse, as special arrangements may be necessary.

If you are taking **Iron Tablets** (e.g. Ferrous Sulphate) please **STOP** taking this medication **7** days before your appointment.

Diabetic patients should contact their diabetic nurse or GP, please inform them that you are required to follow a specific eating plan and be without food for a long period of time. They can give you advice on adjusting any diabetic medication prior to the procedure (see section – How do I prepare for my Flexible Sigmoidoscopy).

Women taking the **oral contraceptive pill** should be aware that taking bowel preparation might prevent the absorption of the pill. Additional contraceptive precautions should be taken until you next period begins.

Please contact bookings if you have a **Pacemaker or ICD - 01284 713551**

Please ensure you bring your current medications with you when you attend for your procedure.

If you are in any doubt whether you should stop or continue your medication, please ring 01284 712653.

How do I prepare for the procedure?

To allow us to complete your flexible sigmoidoscopy we need a clear view of your bowel, so your bowel needs to be completely empty. **Therefore, it is essential that you follow the bowel preparation instructions and eating plan at the end of this booklet.** It is important to follow the instructions carefully so your bowel is empty, otherwise we may need to cancel your appointment.

If you are **unable** to give yourself the micro enema at home, please ring the appointment staff on 01284 713551.

It is important to increase your intake of clear fluids on the day **before** your flexible sigmoidoscopy. You may drink clear fluids up to **2 hours before** your procedure.

The bowel preparation will result in frequent loose stool movements. You may wish to apply a barrier cream to your bottom to avoid irritation or soreness.

It is advisable that you wear loose fitting clothing as this is more comfortable for you after the flexible sigmoidoscopy.

What happens when I arrive?

On arrival to the endoscopy unit please report to reception where the receptionist will check your personal details. You will be asked to take a seat in the waiting area until you are collected by a nurse and taken through to one of our admission rooms. Due to limited space we are unable to allow anyone to accompany you unless they are a carer. We will contact your relative/escort once you are ready to be collected.

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

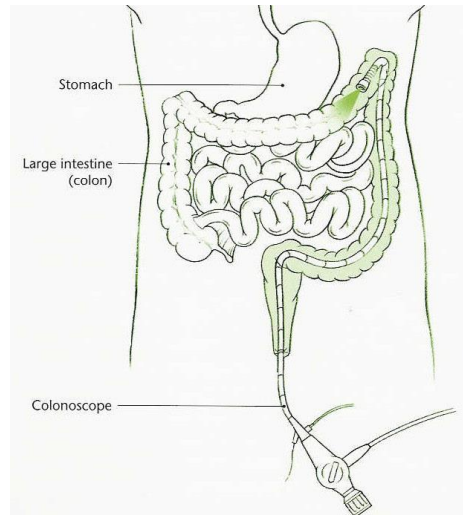
The nurse will discuss the consent form with you and answer any questions that you may have. We want to make sure you understand the procedure and its implications.

You will be asked to undress and put on a hospital gown. Please bring your own dressing gown and slippers if you have them. We offer dignity pants should you wish to wear them, please ask the nurse for these.

You can expect to be on the unit **2 - 4 hours**.

What is a flexible sigmoidoscopy?

A flexible sigmoidoscopy is a procedure that allows the endoscopist to use a flexible tube called a flexible sigmoidoscope to look at the lower part of the large bowel. This is done by passing the scope through your back passage and gently passing it around the lower part of your large bowel.



The flexible sigmoidoscope is connected to a television system, it has a light and a camera built into the end. Pictures are then seen on a television monitor and pictures are taken which will be stored on your medical record.

This examination may identify the cause of your symptoms. Sometimes we can treat them during the procedure. The procedure usually takes between 15 and 30 minutes.

Why do I need a flexible sigmoidoscopy?

Your doctor is concerned about the symptoms you are experiencing with the lower part of your digestive system. Therefore, a flexible sigmoidoscopy is used to find out if there are any problems with your digestive system. It also helps your doctor to decide on further treatment, if necessary.

A flexible sigmoidoscopy is used to investigate a variety of symptoms, for example:

- Abdominal pain
- Change in bowel habit
- Bleeding from the back passage

A flexible sigmoidoscopy also can treat some conditions such as:

- Polyps
- Haemorrhoids (piles)

Alternatives to a flexible sigmoidoscopy

A flexible sigmoidoscopy is the best way of looking at the lining of your large bowel. However, an X-ray examination called CT colonoscopy is one possible test; this involves having a detailed CT scan which provides pictures of the lining of your bowel. Another alternative is a colon capsule which involves swallowing a small disposable capsule the size of a large vitamin pill, the capsule contains a small wireless camera which when swallowed takes multiple pictures. Neither of the X-ray test allow for any treatment to be performed or biopsies to be taken at the same time. Therefore, you may still need to have a flexible sigmoidoscopy. If you wish to discuss these alternative tests, please contact your GP or your hospital doctor.

How a flexible sigmoidoscopy is performed?

A flexible sigmoidoscopy often takes between 15 - 30 minutes to complete, it may take longer if it is being used to treat a condition or biopsies (small samples of tissue) are taken.

You will be escorted into the procedure room and introduced to the team in the room. The endoscopist will check that you have full understanding of the procedure, what it entails and that you are willing to go ahead.

You will then be asked to lie on the bed on your left side, with your knees slightly bent and you will be covered with a blanket.

In order to monitor your heart rate and breathing the nurse looking after you will place a probe onto your finger. They may also monitor your blood pressure by placing a cuff on to your arm.

If you have chosen to have Entonox, you will be shown how to use this

A nurse will be with you at all times giving you guidance and support. The endoscopist will then examine your back passage with a gloved finger to make sure it is safe to pass the flexible sigmoidoscope. The flexible sigmoidoscope will then be gently inserted into your back passage and progressed to the large bowel.

If you have had an end colostomy the endoscopist will need to pass the flexible sigmoidoscope into the stoma to check the colon and you will be asked to lie on your back. If you have any concerns about this, please contact your stoma nurse.

Air will be passed through the flexible sigmoidoscope to open up your colon, to allow a clear view of the lining of your large bowel. This may give you some wind like

discomfort, this will not last long. You may get the sensation of wanting to go to the toilet but as your bowel is empty there is no danger of this happening.

Some patients may experience some discomfort during and after the procedure. This should pass quickly however, please inform the nursing team should you have any concerns.

What is a biopsy?

A biopsy is a small piece of tissue which is removed through the flexible sigmoidoscope using tiny forceps. This procedure is painless, and you will probably not be aware of it being taken.

What are polyps?

Polyps are extra growths of tissue on the bowel wall that can range in size. They are usually benign (not cancer) however if left these can sometimes become cancers. Most polyps can be removed painlessly and completely during the procedure.

Medication options for the procedure

Patients do not necessarily require any medications for a flexible sigmoidoscopy. However, some patient may require some pain relief, this is called Entonox.

- **Entonox:** This is a fast-acting form of pain relief which wear off very quickly. It is administered via a hand-held mouthpiece which you will be shown how to use prior to your procedure. You do not need to have anybody at home with you and you can drive after 30 minutes.

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.

Flexible sigmoidoscopy is what is known as an invasive procedure and carries a small risk of complications:

- **Haemorrhage (bleeding)** – removing a polyp can sometimes cause bleeding, although this is usually stopped during the procedure. Occasionally bleeding

may occur when a patient has gone home and even more rarely some of these people may need a blood transfusion.

- **Perforation (tear)** – the risk of this is small, the risk is increased if any treatment is performed, i.e. removing a polyp. On rare occasions this may require an operation which involves making a temporary opening (a stoma) in the abdomen to allow the passage of waste (faeces).
- **Reactions to medications given** – you may experience a reaction to the sedation given, this is rare but if this should happen, we do have medications to reverse the effects of the sedative.

As with 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 discuss it with the person who referred you or speak to us then you attend for your appointment.

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.

If you have had Entonox

This wears off very quickly and therefore no restrictions apply, you do not need anyone at home with you and you may drive after 30 minutes. You will be offered a drink and something to eat while you wait for your escort home.

Discharge

When you are ready to be discharged from the procedure the nurse will tell you what was seen during your procedure and what to do next. They will record your observations and answer any questions you may have.

After you have been discharged

Serious side effects from this procedure are rare, as previously stated. You may feel a little bloated if some of the air that we use for the test remains. Both these things will pass and need no medication.

If you experience any of the following symptoms:

- Severe abdominal pain (not cramp caused by wind)
- A firm and swollen abdomen
- A sudden passing of a large amount of blood from you back passage (if it is a very small amount of blood, take no action)
- High Temperature or feeling feverish
- Vomiting

Please contact:

- The Endoscopy Unit which is open from 8.00am to 9.30 Monday to Thursday and 8.00am to 6.00pm Friday. Our contact number is 01284 713952. If you have any queries that you wish to discuss with an endoscopy nurse out of these times, please contact the West Suffolk Hospital switchboard on 01284 713000 asking to speak to the on-call endoscopy Nurse.
- Your GP
- Or contact the A & E department at the West Suffolk Hospital

You should contact A&E if you experience severe pain in the abdomen, a fever, vomiting, passing a large amount of blood after the test. Please ensure you take your endoscopy report with you.

Please be advised that patients are unable to donate blood for 4 months following an endoscopy procedure, 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 flexible sigmoidoscopy 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 patients' privacy and dignity we only allow patient (and carers) through to the ward area. Relatives/escorts will be contacted once you are ready for collection.

Please do not bring valuables (e.g. jewellery etc) to the hospital as the hospital cannot accept 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 all the information we have sent you carefully
- Fill in the health questionnaire
- Drink plenty of clear fluids up to **2 hours** before your appointment
- Follow specified bowel preparation and **eating plan**
- Check for specific medication instructions
- Transport arrangements have been made if you are having sedation

Please bring the following items with you:

- This booklet
- Your completed health questionnaire
- Your consent form (**you do not need to complete this it will be done prior to your procedure**)
- Please bring all current medications with you

Contact numbers

- Cancellation/change of appointment **Tel 01284 713551**
- Pre-assessment for medical related advice **Tel 01284 712653**
- Endoscopy Unit **Tel 01284 713952**
- Out of hours **Tel 01284 713000**

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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Instructions for home bowel preparation and eating plan

Please read these instructions very carefully

The success of your flexible sigmoidoscopy depends on your bowel being as clear as possible.

The procedure may need to be repeated if you do not have a clear bowel.

Two days before the flexible sigmoidoscopy

At **6.00pm** take **2** Bisacodyl tablets with a glass of water.

You should expect frequent loose bowel motions to start at any time after taking a dose of Bisacodyl. Please ensure that you always have access to a toilet.

You may eat and drink as normal.

The day before your flexible sigmoidoscopy

At **8.00am** take **2** Bisacodyl tablets with a glass of water.

At **6.00pm** take **2** Bisacodyl tablets with a glass of water.

Only a **small breakfast** and a **small lunch** made up of low residue foods and plenty of clear fluids are allowed – see eating plan below:

You can eat low fibre foods including the following:

- **Dairy** - milk (2 cups/day), plain yoghurt, cheese, butter, margarine
- **Fish** – white fish: boiled/steamed/grilled
- **Meat** – chicken, boiled/steamed/grilled
- **Eggs**
- **White pasta and white rice**
- **Bread** – white bread, white pitta, white flour chapattis
- **Potatoes** – boiled or mashed – no skin
- **Soups** – clear soups (no solid bits)

- **Meat extracts drinks** – Bovril®, Oxo®
- **Desserts** – clear jelly (not red or orange), boiled sweets, ice cream, chocolate (no fruit or nut pieces)
- **Salt, pepper, sugar, sweeteners and honey**

Have plenty to drink from tea, coffee, squash, fizzy drinks, water, clear fruit juices (e.g. apple, grape, cranberry).

Suggested meals could include for example:

Breakfast: White bread/toast with butter and honey. Boiled or poached egg.

Lunch: Grilled fish or chicken with white rice or boiled potatoes (no skin)
or Scrambled eggs on white toast, vanilla ice cream.

DO NOT eat high fibre foods such as:

- Red meats, pink fish (e.g. salmon)
- Fruit, vegetables, salad, pips, seeds, bran, beans, lentils
- Brown bread, brown or wild rice, brown pasta
- Pickles, chutneys
- Cereals such as bran flakes, muesli or Weetabix®.

No further solid food or milk products are allowed after lunch.

Drink **plenty of clear fluids**, (from drinks list), preferably water. Any tea/coffee taken after lunch should be black (**no milk**).

The day of your flexible sigmoidoscopy

No solid food or milk products.

Please continue drinking clear fluids only, as above for up to 2 hours before your appointment.

Use the micro-enema 1 hour before you leave home.