

South Infirmary-Victoria University Hospital – Endoscopy Unit

Patient Information for Flexible Sigmoidoscopy

Before your appointment

- Stop taking iron tablets seven days before the procedure. All other medication (including aspirin) should be taken as normal. Bring a list of your medications to hospital with you to the hospital.
- If you have any questions or find that you cannot keep this appointment, please contact the Admissions Office between 08:00 a.m. and 17:00 p.m. Monday, Tuesday, Wednesday and Friday on 021-4926322.
- Please contact the Admissions Department to advise them if you are a Diabetic, as alternative arrangements may need to be made for your admission.
- Don't use dentafix on day of procedure.

At the hospital

- Please come to the Admissions Department next to the Out-Patients Department

In the ward

- The nurse will take some details and the doctor will talk to you, answer any questions about the procedure and complete the consent process for the procedure.
- You will need to undress and put on a gown. We will ask you to remove any glasses.
- The nurse will administer a phosphate enema into your back passage to empty your lower bowel in preparation for the procedure
- An I/V cannula may be inserted in the ward.
- If you are choosing the sedation option we will ask you to remove dentures.

Sedatives

For many people a flexible scope is only slightly uncomfortable and sedation is not required. Sometimes the procedure can be uncomfortable, for example, if there is diverticular disease present or if the bowel has many loops – these situations may not be predictable before the examination. If you are worried about potential discomfort or would like sedation for other reasons then you can ask for it. The options are discussed below;

1. No sedation option:

The advantage is that you can leave as soon as the procedure is finished. 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. Sedation option: we will give you an injection into a vein to make you feel relaxed and sleepy but not unconscious (this is **not** a general anaesthetic). This option means you may not be aware of the procedure. The disadvantages to this option are:

- You will need to stay whilst you recover which will take an hour or more.
- You will need to be escorted home
- The injection will continue to have a mild sedative effect for up to 24 hours and may leave you unsteady on your feet for a while.

If you choose sedation, you **must** arrange for a responsible adult to take you home. You will not be able to drive yourself. **If you come without having arranged an escort, we will have to cancel the procedure.**

What is a flexible sigmoidoscopy?

A sigmoidoscopy is a procedure where a doctor looks into the rectum and sigmoid colon (lower bowel) using an instrument called a scope. The scope is a small tube with a light source about the thickness of your finger.

The doctor inserts the scope into the back passage into the bowel to examine the lining. This allows us to see if there are any problems such as inflammation or polyps (a polyp is a bit like a wart). The procedure usually takes about 10 minutes but times may vary considerably. If it takes longer, you should not worry. Sometimes it is helpful for diagnosis to take a sample (biopsy) of the lining of the bowel. A small instrument, called forceps, passes through the endoscope to 'pinch' out a tiny bit of the lining (about the size of a pinhead). This sample is sent to the laboratory for analysis. It is also possible to remove polyps in a similar way. Most people find this completely painless.

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What happens during the procedure?

We will make you comfortable on a trolley, lying on your left side with your knees bent. For your comfort and reassurance, a theatre nurse will stay with you throughout the procedure.

If applicable, the doctor will give you the injection and we may give you oxygen through a nasal prongs and put a plastic 'peg' will be placed on your finger to monitor your pulse and oxygen levels an attaché a cardiac monitor.

The doctor gently inserts the scope through your anus into your colon (bowel). During the procedure, air is passed into your colon to give a clear view of its lining. You may experience some wind-like pains, but they should not last long.

At this time, you might feel like you need to go to the toilet. This is a perfectly natural reaction but as the bowel will be empty there is no need to worry. There may be periods of discomfort. If you are finding the procedure more uncomfortable than you would like, please let the nurse know. However, if you make it clear that you are too uncomfortable we will stop the procedure.

Are there any side-effects or complications from a sigmoidoscopy?

Most sigmoidoscopies are done without problem. Some people have some crampy pains and excess wind after the procedure.

Occasionally, the scope causes some damage to the rectum or colon. This may cause bleeding, infection and, rarely, perforation of the colon. If any of the following

- Severe abdominal pain
- Bloody bowel movements or rectal bleeding
- Fever

occur within 48 hours after a sigmoidoscopy, consult a doctor immediately.

After the procedure

If you have not had sedation, you may go home as soon as the nurse advises after the procedure.

If you had sedation, we will take you to the ward area while the sedation wears off.

When you are sufficiently awake, we will give you a drink and something to eat before you get dressed. You can then go home; this may be up to 2 hours following the procedure.

We advise you not to drive, operate machinery, return to work, drink alcohol or sign legally binding documents for a 24-hour period after the procedure. We also advise you to have a responsible adult to stay with you overnight. You can eat and drink as normal.

If you experience any of the following,

- Severe pain
- Persistent bleeding

you should contact your GP, or the hospital 021-4926100 for further advice.

When will I know the result?

The doctor may be able to let you the results after the procedure. If you had sedation, it is a good idea to have someone with you when you talk to the doctor because the sedation can affect your ability to remember the discussion. Final results from biopsies or polyp removals will be given to you by the Consultant or General Practitioner who requested the procedure at a clinic appointment or by letter. These results can take 4-6 weeks to come through. You should discuss details of these results and any further treatment with that person.

In some cases further investigations such as a Barium Enema or a Computerised Tomography (CT) colon scan may be arranged. If these are needed we will let you know.

Your Consultant may arrange additional investigations for you and you will receive additional information on any further investigations.