



Intus

Digestive and Colorectal Care

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Gastroscopy information sheet

What is a gastroscopy?

Gastroscopy is an examination of the lining of the oesophagus (gullet), stomach and duodenum (small intestine).

The gastroscope is a long flexible tube with a tiny video camera on the end, with thousands of tiny glass fibres that transmit light to the tip. It is passed into the mouth and down into the oesophagus and stomach. The lining of the stomach and oesophagus are directly visualised on a video screen. The lining is examined for abnormalities such as inflammation, ulceration or narrowing. Gastroscopy is the most accurate way of examining the inside of the oesophagus, stomach and duodenum.

Gastroscopy may be recommended:

- To look for causes of indigestion or swallowing difficulty;
- To determine the extent and severity of inflammation and/or reflux in the stomach and oesophagus;
- To look for causes of blood loss in the stomach;
- To check for ulcers and polyps;
- To biopsy for coeliac disease, which is taken from the duodenum.

Biopsies can be taken or polyps removed during the examination.

Preparation for gastroscopy

For a successful gastroscopy it is very important that the doctor can see the lining of your stomach clearly. For this reason you should have no food 6 hours prior to your procedure. You can drink clear fluids until 4 hours prior to your procedure then nothing more. If the examination is conducted in the morning, this simply means that you should have nothing to eat or drink after waking that morning.

Please notify the nurse at Intus of any allergies, or if you are a diabetic, have any metal implants, an artificial heart valve or are taking blood thinners.

You will be required to sign a consent form for a gastroscopy with biopsy and CLO test (a test for bacteria causing ulcers), and also to agree to any appropriate intervention by your doctor during the procedure should it be considered necessary.

The examination

The examination usually takes about 15 minutes. Prior to the commencement of the examination, your throat may be sprayed with a local anaesthetic to reduce the 'gagging' sensation. You may need to wear a mouth guard to protect your teeth and to prevent damage to the gastroscope. A small needle may be placed in the back of your hand, through which a light sedative may be given to make you relaxed and drowsy.

This is not compulsory, and you may choose not to have sedation. It is not a general anaesthetic such as you would have for an operation and you will recover quickly after the examination.

Photographs may be taken of your gastrointestinal tract during the examination as part of your clinical record. Bed rails will be raised at times to maintain your safety during the procedure. You will be in the examination room for about 30 minutes.

About sedation

- It is not a general anaesthetic, i.e. you are not unconscious.
- You may be given a combination of two drugs – a sedative and a pain reliever.
- You will probably feel drowsy and may fall in to a light sleep, though you will rouse easily.
- The drugs suppress your instinct to breathe, so your heart rate and oxygen saturation levels will be monitored throughout the procedure.
- The medications have an amnesic effect – your memory of the procedure and afterwards will be distorted or even lost for up to 24 hours.
- You should not drive, operate heavy or potentially harmful machinery, drink alcohol, sign documents, or make any important decisions
- *Sedation may trigger recall of past traumatic events of a sensitive nature. If you have any concerns about the invasiveness of this procedure, we would strongly recommend that you see your consultant prior to coming in for the investigation, so that alternative arrangements may be discussed.*

At the completion of the examination you will be taken to the recovery area for a period of rest and observation. You will be given something to eat (usually a sandwich) and a drink. **If you have any special dietary requirements or allergies i.e. vegetarian, gluten free, dairy free, or any other specific requirements, you must phone Intus to inform them prior to your procedure, so that they can order appropriate food for you.**

If you have been given sedative or pain killing drugs, the usual recovery time is about one hour. It will be necessary for you to arrange for someone to collect you from Reception to drive you home. It is illegal to drive yourself following sedation. If you have not had any drugs, you may leave after the procedure and continue your normal day. We would prefer you are driven home by friends or family rather than a taxi.

The results of the gastroscopy will be discussed with you, by a nurse, at the completion of the procedure. You will be given a written report, and a copy of this will also go to your GP and any other referring doctor. Your GP will also receive a copy of your results from the laboratory if there were any biopsies or polyps taken at the time of your procedure. You may have a hazy memory of the period during and just after the examination, so if you have any questions about the gastroscopy, please do not hesitate to call us for a report. If a polyp or biopsy has been taken it will be sent to the laboratory and a report is usually available within 3-4 days. A copy of this report is sent to your GP also.

Safety measures

Safety measures (which are sometimes called enablers) will be used during your examination. This may involve holding your hand, use of a mouth guard, using bedrails and taping or bandaging of your intravenous (vein access) port.

Complications

Complications are **rare**. However, as with any diagnostic procedure, there are potential risk factors to be considered. It may be necessary for a complication to be managed by another health care provider such as the public hospital.

- Bleeding – this can occur with any type of biopsy.
- Perforation of the oesophagus or stomach – this may require surgical intervention.
- Risk of damage to crowned teeth.
- Allergic reaction
- **If you do receive treatment from another provider, related to complications, please ensure that Intus is aware of this. You can do this by phoning us directly or asking the health care provider to contact us.**

Follow up

It may be necessary for you to be seen by your specialist or GP one or two weeks following the gastroscopy for biopsy results and further management of your situation.

If you have any queries, please contact:

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You are encouraged to discuss this procedure with your family doctor.