



Colonoscopy



DIAGNOSTIC CENTRE BLEĐ

DEAR PATIENT,

*This booklet has been prepared to provide information about the **colonoscopy** procedure and related relevant questions and answers.*

Please, follow the instructions.

** The colonoscopy procedure requires prior to the examination or procedure for you and your doctor to sign a statement "Consent to medical care after explanation", which is a legally required form.*

WHAT IS A COLONOSCOPY?

A colonoscopy is a procedure which enables us to look at the lining of the large bowel (colon) and rectum, to establish whether there is any disease present. Colonoscopy is generally considered to be the gold standard for colorectal screening.

During colonoscopy a long, flexible tube (colonoscope) is inserted into the rectum. A tiny video camera at the tip of the tube allows the doctor to examine the inside of the entire colon. If necessary, polyps and other types of abnormalities can be removed through the scope and tissue sample can be taken as well.

REASONS FOR A COLONOSCOPY

Establishing the cause of indigestion (intestinal disorder). Colonoscopy helps to clarify possible causes of abdominal pain, rectal bleeding, chronic constipation, chronic diarrhoea and other intestinal problems.

Colorectal cancer screening. If you are 50 or more years old or are at average risk for the colon cancer – do not have any other risk factors except the age – your doctor may advise you the colonoscopy every 10 years or more frequently.

WHAT ARE THE POSSIBLE RISKS OF A COLONOSCOPY?

Colonoscopy complications are very rare and may include:

- Adverse effects of the sedation if used during the examination (see booklet on sedation).
- Bleeding from the site of biopsy or polypoid/non-polypoid abnormality removal.
- Perforation or tear of the lining of the bowel.
- Other rare complications that may require additional procedures and action.

HOW TO PREPARE FOR A COLONOSCOPY?

Before a colonoscopy, it is necessary to conduct an appropriate pre-treatment or colon cleansing respectively. Any residues in your colon can hinder the visibility and thus, accuracy and reliability of the procedure. In order to prepare properly, you should strictly follow the received instructions and your doctor's instructions. He may require from you the following:

Have a special diet at least one day before the procedure. You should not eat solid food the day before the procedure. Liquids are limited to solely clear beverages – clear water, tea or coffee without milk or cream, clear soup and fizzy beverages. Avoid red coloured liquids that can be mistaken for blood during the colonoscopy. After midnight, the night before the procedure, you should not consume liquid.

Consume liquid for cleansing following the enclosed instructions (there are several types of products available and few preparation methods) on the evening before the procedure if you have not received other instructions. The last cleansing dose should be taken no later than two hours prior to the planned procedure.

Adjust the medication intake. Notify your doctor about the medications at least one week prior to the procedure – especially if you are being treated for diabetes, high blood pressure or heart problems, if you are taking medications and supplements that contain iron or are taking aspirin or other medications to prevent blood clotting. It may be necessary to adjust the dose of certain medicines or temporarily fully stop their intake.

WHAT TO EXPECT WITH A COLONOSCOPY?

During the procedure:

It is necessary to undress from the waist down. You will get special panties to wear during the procedure. During colonoscopy, in most cases, patients do not need sedation since the procedure performed by an experienced colonoscopist is painless.

If the doctor believes that sedation is needed, or the patient wants it, it will be provided. Sometimes only a mild sedative in a pill form is required, rarely the medication is inserted into a vein and combined with a pain-killing medicine (see booklet on sedation).

During a colonoscopy, as you will lie on your left side with your knees bent the doctor will insert a colonoscope into your rectum and before that, apply a special local anaesthetic in a form of ointment in your anus. A small camera mounted on the colonoscope transmits video images to a computer screen, allowing the doctor to carefully examine and analyse the entire colon.

A colonoscope which is long enough to examine the entire colon length all the way to the very end (caecum) has a channel through which the air (or CO₂) gently passes, the light source and the working channel, through which diagnostic and therapeutic procedures are carried out (biopsies and removal of abnormalities) and through which the intestinal mucosa can be rinsed with water or fluid aspirated from the bowel.

WHAT TO EXPECT WITH A COLONOSCOPY?

The end of colon or site to where it will be possible to reach farthest with the instrument will be photo-documented and it will be an integral part of your colonoscopy findings.

Also the largest abnormality discovered by the colonoscopy will be photo-documented. Colonoscopy in most cases takes from 20 minutes to 1 hour.

After the procedure:

You will need an adult to accompany you home. In case of sedation, post-procedure requires different action and greater attention of health staff and your companion, especially during the recovery and during the time of medication impact (see booklet on sedation).

A few hours after the procedure you may still feel bloating, tension and spasms, until you with the passage of flatus (gas) eliminate the excess air. These problems may be alleviated with walking. When using CO₂ these problems do not occur because the gas is absorbed through the intestinal wall and then excreted from the lungs.

In the first defecation you may notice traces of blood, which should not worry you. Usually this is not a reason to panic. However, it is necessary to consult your doctor if this continues or you notice significant amount of blood and clots. It is also important to see a doctor or call the contact telephone number if you have a persistent pain or fever 37.8 ° C or more.

COLONOSCOPY RESULT

Upon the completion of colonoscopy, your doctor will inform you on the results and explain the necessary further action.

Negative result

Colonoscopy is negative and the test results are normal if the doctor has not identified any abnormality in the bowel. If you are at average risk for the colorectal cancer – the only risk factor being age, the doctor may advise you another screening procedure after 10 years.

Positive result

Colonoscopy is positive if the doctor identifies polyps or abnormalities in the colon. Depending on the size, number and shape of polypoid or non-polypoid abnormalities, you will need closer monitoring in the future. If one or at most two abnormalities are found which are less than one centimetre in diameter, the colonoscopy will be repeated after 5 to 10 years, under the condition that there are no other risk factors. If you have a larger polyp, more polyps or polyps with specific histological features, the doctor will advise you a check-up colonoscopy in the period of three to five years – again in correlation to other risk factors. In case of large, complex and problematic polyps, your doctor may advise a check-up already after three or six months or after a year. If you are diagnosed with polyp or other abnormality which cannot be removed endoscopically, you will be advised an additional surgery.

COLONOSCOPY RESULT

Further action

The further action is sometimes based on the histological result of removed or biopsied abnormalities. You and your doctor will be informed about this later by post. If you wish, we will inform you about the findings also personally within a counselling interview.

The possibility of unreliable examination

If the doctor assesses the examination as unreliable, due to the lack of visibility because of e.g. insufficient cleansing, he may determine a shorter period for the check-up colonoscopy. If your doctor was not successful and could not perform the examination of the entire colon, he will recommend CT – colonography or a contrast examination, irigography, which could exclude abnormalities in unexamined parts of the colon.

*Upon the completion of **colonoscopy**, your doctor will inform you on the results and explain the necessary further action.*

DO YOU HAVE MORE QUESTIONS?

Before the colonoscopy the doctor will inform you on the procedure and answer all your questions. In case of endoscopic intervention and your discharge to home care, you will be given written instructions on what you can and cannot do in the next few days.

You will also be re-informed on possible adverse complications and the necessary action to be taken if they occur. If you and your doctor decide that sedation is necessary, you will also get all the information regarding preparation, different methods and possible complications.

In case something was not understood or you have additional questions, please, do not hesitate to ask for clarification. After all, your health, your confidence in the procedure and your safety are at stake.

Before your arrival to the gastroenterology clinic, we will send you additional instructions by post.

We advise you not to come alone when you have a colonoscopy, but arrange for someone to accompany you.

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