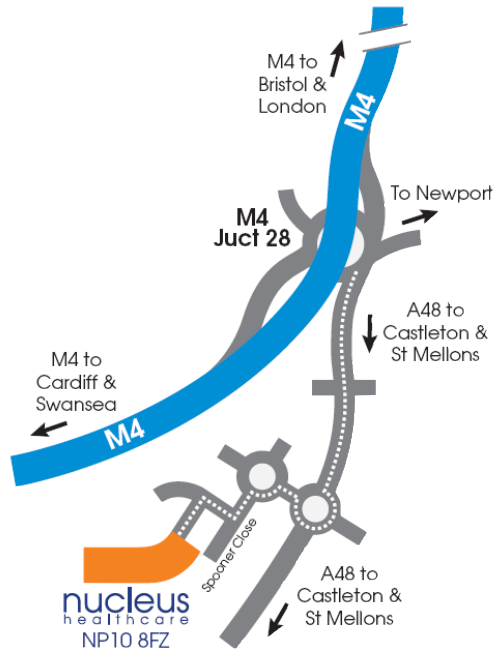


This fact sheet was designed to help you. Please do not hesitate to ask any questions of our specialists and nurses

If you have any problems following your procedure please ring

Nucleus Healthcare during opening hours 07.30hrs – 18.00hrs



## FLEXIBLE SIGMOIDOSCOPY INSIDE STORY

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Endoscopy is a procedure, diagnostic or therapeutic, where a thin flexible endoscope is used to view the lining of the stomach or bowel. The image produced via the video processor is displayed on a television screen that allows an excellent view for your specialist. Special instruments can be passed down to obtain a biopsy, a tiny tissue sample, and to remove polyps. All samples are sent to the laboratory for analysis.

**Flexible sigmoidoscopy** is the examination of the first part of the large bowel called the rectum and sigmoid, colon.

### **Benefits of having a flexible sigmoidoscopy**

This procedure will help diagnose problems such as bleeding, pain, diarrhoea or constipation. It is also used to check for polyps, which are abnormal lumps. Most polyps are benign but to be sure, they need to be removed and examined under a microscope.

### **Bring with you**

- Your referral letter
- Any X rays relevant to your procedure
- A list of current medications you are taking
- Medical insurance authorisation number/letter if applicable

### **On arrival**

You may eat and drink normally prior to the procedure. If you feel anxious about your procedure, you may have light sedation, which will mean you have to stay in the hospital for an extra hour, you will also need a responsible person to take you home and to remain with you for 24 hours, due to sedative effects.

When you arrive at the hospital, your details will be taken by a nurse and baseline observations made, that is your blood pressure, pulse and temperature. You will then change into a gown and will be given an enema, if the gastroenterologist requires you to have one, to ensure the bowel is clean enough for the consultant to see inside.

### **The procedure**

You will sign a consent form with the consultant. If you require sedation, a needle will be inserted into the back of your hand at this stage to administer the drugs. You will lie on your left hand side with your knees drawn up to your chest. Your back passage will be examined by the endoscopist with a gloved finger first. The endoscope will be passed gently into your rectum and gradually through the first part of your bowel. Air will be passed into the bowel to expand the bowel for a clearer look at the lining. At this stage

you may feel a little windy and some discomfort – or you may feel like opening your bowels – this will not happen as your bowel will have been cleared out previously. Biopsies may be taken but this will not be painful. The whole procedure will take approximately 10 minutes.

### **Are there any risks?**

This is a safe procedure but there are some risks associated with this procedure which are:

Bleeding – after a biopsy is taken, you may notice small traces of blood coming from the back passage. This is normal and should stop after 24 hours. If you have heavy bleeding it will need to be checked.

Perforation – This is where a puncture has been made somewhere in the lining of the bowel. This will cause bleeding and pain and you may need surgery to rectify it. For purely diagnostic reasons, the risk of perforation is very low but the risk increases slightly if polyps are removed.

Removal of polyps – may cause some bleeding post procedure but again should clear up after 24 hours.

Reaction to the sedatives – this is very uncommon but is of concern to people who have severe heart disease or lung disease. The majority of patients undergoing flexible sigmoidoscopy have no sedation.

### **If you have any of the following symptoms hours or days after your procedure, you should contact Nucleus Healthcare immediately:**

- Severe abdominal pain
- Black tarry motions
- Persistent bleeding, fever or other symptoms that cause concern

### **After the flexible sigmoidoscopy**

Following the procedure, if you have not had sedation, you will be able to go home straight away. Your consultant will give you any diagnosis possible, however you may need to wait for the results of biopsies that may have been taken. The biopsy results will be sent to the consultant, who will have made an appointment for you to come back for the results, before you leave the hospital.