

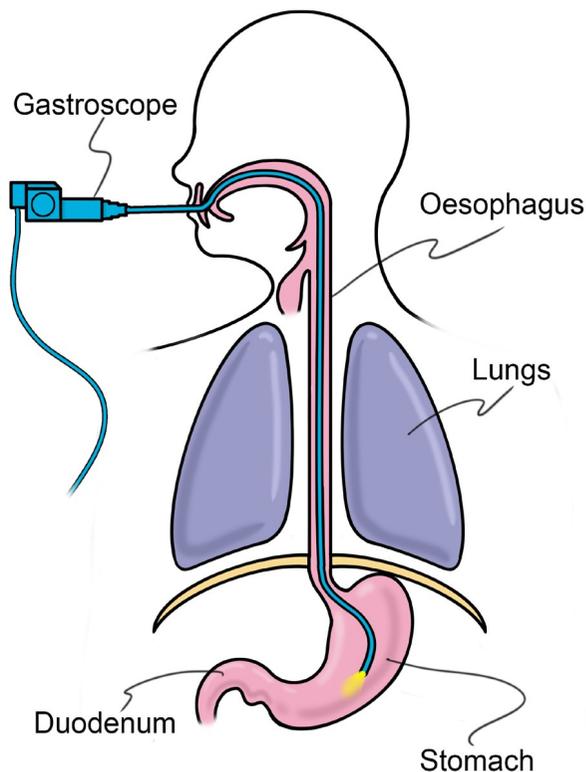
Having a Gastroscopy

Endoscopy unit: 01922 656217

Your Doctor has advised that you should have a test called a Gastroscopy. This leaflet explains why you need the investigation, how to prepare for it and what to expect immediately afterwards. If you have any remaining concerns or queries after you have read the leaflet, please contact us on the number shown above.

What is a Gastroscopy?

A Gastroscopy allows a Doctor or Nurse to look into your Gullet (Oesophagus), Stomach and the first part of the Small Bowel (Duodenum). The Gastroscope is a long flexible tube, thinner than your finger, with a bright light at the end. It is passed



through your mouth, down your Oesophagus, into your Stomach and Duodenum.

During the course of the investigation the Doctor or Nurse may need to obtain biopsies (tiny pieces of tissue) to help find the cause of your symptoms. The tissue will be sent to the laboratories for analysis. The tissue is removed painlessly through the Gastroscope using a tiny grasper (Forceps).

Are there any alternatives to a Gastroscopy?

In certain circumstances your Doctor may suggest a Barium Swallow or Barium Meal X-ray could be done. A Barium test does not allow the Doctor to take a specimen of tissue for investigation so a Gastroscope is usually performed.

What if I do not have a Gastroscopy?

A Gastroscopy has been recommended because you have symptoms, or you have had other investigations, which suggest disease of the Oesophagus, Stomach or Small Bowel. If you do not have the Gastroscopy then disease of these areas may go undiagnosed.

Alternative investigations can be performed, but a Gastroscopy may still need to be done to confirm the diagnosis or to deliver treatment.

Preparation for the Gastroscopy

It is vital that your stomach is empty for the Gastroscopy to be carried out.

To ensure your Stomach is empty it is necessary for you to not have anything to eat for 6 hours before your appointment and not to drink anything 4 hours before your appointment.

Medication

If you take Warfarin, Clopidogrel, Rivaroxaban, Dabigatran or other blood thinning drugs (excluding Aspirin) or if you are a Diabetic, please contact us and ask to speak to a Nurse. We may need to alter your medication before you have your Gastroscopy. You may take all other medications as normal.

Consent

You have been sent a yellow consent form; this document explains the risks associated with this procedure. We would like you to read through this thoroughly and sign it before the procedure if you are happy to have the procedure done. If you have any questions related to the

form you can discuss them with the Endoscopist or Nurse before your procedure.

If you are unable to complete the form do not worry your consent will be confirmed before you have your test. **Please bring the consent form with you to your appointment.**

On the day of the test

When you arrive at the Endoscopy Unit please report to reception desk, your details will be confirmed and you will then be asked to take a seat in the waiting area.

In readiness for your procedure a Nurse will invite you into a separate room to ask you questions about your health, explain about the procedure and confirm your arrangements for going home.

You will then have the chance to ask any questions that you may have.

There may be a slight delay before you are taken through for your procedure; however a relative or friend is more than welcome to wait with you.

Throat Spray Method

If you would prefer for your procedure to be carried out without sedation, a local anaesthetic spray is used to numb the throat. It is sprayed into the back of the mouth and then you are asked to swallow. After a few seconds it will start to make your throat feel numb. Having the spray makes it more comfortable when the Gastroscope is passed down through your throat. With the throat spray method you may be leave as soon as the test is finished, you can continue your day as normal and you may be able to drive.

Sedation

If you would prefer for your procedure to be carried out with sedation you will be given an injection into a vein in your hand or arm; this will make you feel drowsy and relaxed to the point that some patients have no memory of the procedure being carried out.

Sometimes sedation may not be advisable because of your health or if you do not have anyone to care for you after the procedure.

Due to the sedation, it is vital that you have an adult to accompany you home (by car or taxi) and for an adult to be with you until the next day. It is strongly recommended that you do not drink any alcohol, drive any vehicle, operate any machinery, sign any legal documents, or return to work for 24 hours. This is because the effects of the sedation last this long.

These arrangements will be confirmed before your test and **your test will be cancelled if you do not arrange someone to be with you.**

In the examination room

Before the Gastroscopy is done you will be asked to remove your glasses if you wear them (contact lenses can stay in) and remove any false teeth (a denture pot is provided). Outer clothing such as coats or jumpers will also need to be removed. The Gastroscopy will then be performed once you have confirmed whether you wish to have the local anaesthetic spray to your throat or sedation.

The Gastroscopy

A Nurse will stay with you throughout your procedure. You will be made comfortable lying on your left side on a trolley.

A mouth guard will then be placed between your teeth (or gums) and a nurse will hold this in place, the guard keeps your mouth slightly open and prevents you from biting the Gastroscope.

Throughout the Gastroscopy a monitor is placed on your finger to check your pulse and oxygen levels and you may be given oxygen through a small plastic tube in your nostrils

The Doctor or Nurse will pass the Gastroscope over your tongue to the back of your throat and will ask you to swallow. The Gastroscope will then pass into your Oesophagus, Stomach and Duodenum. The procedure will only take a few minutes.

You may feel the Gastroscope move inside you and you may feel full of air and bloated. This is because air is blown into your stomach to ensure good views. During the Gastroscopy the nurse, using a device similar to a dentist, will remove any saliva collecting in your mouth. Tissue samples (biopsies) may be taken painlessly during the Gastroscopy. As soon as the Gastroscope is removed, the mouth guard will be taken out of your mouth and the test is finished.

After Gastroscopy

If you have had local anaesthetic throat spray will have to wait 1 hour before you can eat or drink. You may be able to go home earlier than this; the nurse will advise you when you are fit to leave and will give you some written information to take home with you.

If you have had sedation you will be cared for in the recovery area, on the trolley, until you are fully awake and it is safe for you to go home. This may take between 30 minutes and 1 hour. You will be escorted to the waiting area by the nurse team to the person accompanying you and you will be given written instructions to take home with you.

When will I receive the results?

The Doctor or Nurse will give you preliminary results together with a copy of your report before you go home. A copy will also be sent to your GP.

What are the risks of having a Gastroscopy?

The majority of Gastroscopies are safe and uncomplicated. However, as with any procedure there is a small chance of complications or side effects, you may suffer from:

- **A sore throat**
- **Feel some wind in your stomach.**

(This will settle in a few days).

National studies have shown that serious complications are rare. They include:

- **Adverse drug reaction**
- **Bleeding.** This occurs in less than 1 in 5000 cases.
- **Perforation** (a tear or hole) in the oesophagus or stomach occurs in approximately 1 in 1000 cases.

If a complication does occur it may be necessary for you to stay in hospital and have an urgent operation.

Missed pathology is a possibility with all endoscopies. There are folds that can hide small lesions. Endoscopists are trained to look thoroughly, but still there is a small known miss rate.

Training

Walsall Healthcare NHS Trust Endoscopy Unit has Doctors and Nurses who are trainee Endoscopists. You may be asked if you would be willing to be examined by a Trainee Doctor / Trainee Nurse Endoscopist.

All trainees are under the direct supervision of an expert Consultant Trainer until they are fully competent; the Consultant is there to ensure your safety and comfort. With your help it will be possible to train the specialists of the future.

The Patient Relations Team is here if you need them:

Walsall Manor Hospital, Moat Road, Walsall, WS2 9PS

Tel: 01922 656463

Email: patientrelations@walsallhealthcare.nhs.uk