

UNDERSTANDING COLONOSCOPY

This leaflet has been written to help you understand the procedure and answer some questions you may have.

WHAT IS A COLONOSCOPY?

A colonoscopy is an examination of your large bowel called the colon. A flexible tube (colonoscope) is passed into your back passage and around the bowel. This will give the endoscopist a clear view of the lining of your bowel.

WHY DO I NEED A COLONOSCOPY?

You may have been advised to undergo this investigation if you have a significant family history of bowel cancer or if you have symptoms.

Colonoscopy screening aims to detect polyps or early changes in the bowel lining to reduce the risk of cancer developing or to detect cancer at an early stage.

A polyp is an abnormal growth or swelling from the lining of the bowel. The majority of polyps are benign (not cancerous), but can sometimes change into cancer over a number of years.

BENEFITS OF THE PROCEDURE

There are a few different ways of looking at the lining of the bowel. The benefit of this test (colonoscopy) is that the lining of the bowel is seen directly and if any biopsies need to be taken or polyps removed, they can usually be done at this time.

THE COLONOSCOPY INVESTIGATION

The colonoscopy is normally carried out as an outpatient.

Prior to the procedure the bowel must be completely clean for the colonoscopy to be effective and the hospital will provide detailed instruction of how to do this.

Usually this consists of taking special cleansing solutions (laxatives) and restricting your diet two days before the procedure.

WHAT HAPPENS ON THE DAY?

You may be given a sedative to help you relax and then asked to lie on your side.

A thin flexible tube called a colonoscope is passed into your rectum (back passage) and

guided around your large bowel. The specialist uses this to see the inside of your bowel on a TV screen.

During the colonoscopy some air is pumped into your bowel. This may give you a bloating or cramping feeling in your abdomen. The sedative you are given is likely to make you feel drowsy and you may not remember very much about the investigation. The colonoscopy should take between 30 and 45 minutes.

If there are areas of the bowel that need to be investigated a small sample (or biopsy) may be taken. This generally does not cause additional pain. Biopsies can be taken for many reasons. This does not necessarily mean that cancer is suspected.

RESULTS

The specialist who performed the colonoscopy will explain the outcome of your investigation to you. You will be told if any tissue samples were removed and you will receive the results of any biopsy within three weeks of the investigation.

AFTER THE COLONOSCOPY

As most people have sedation during the procedure, you will not be permitted to drive and must have someone to collect you and be able to stay with you for the next 24 hours.

RISKS ASSOCIATED WITH COLONOSCOPY

For most people a colonoscopy is a straightforward procedure, but in rare cases there may be complications. These can include the following:

- Heavy bleeding that needs further investigation or medical advice. Polyps or tissue samples that are removed during a colonoscopy *may* cause heavy bleeding. It is estimated that this could happen in around one in every 100-200 colonoscopies.
- A perforated bowel. The colonoscope can cause a hole (perforation) in the wall of your bowel. The chances of this happening are about one in 1,000. If this happens, you may need an operation.
- Breathing or heart problems. You may have a reaction to the sedative that may make you have temporary breathing or heart problems. Serious problems are rare as you are carefully monitored during the investigation.

Some of these complications may need further treatment, or even an operation.