Having a Gastroscopy

*Important*
If you are unable to keep your appointment, please telephone the appropriate number as soon as possible, so that the appointment can be allocated to another patient.

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What is a gastroscopy?

You have been advised to have a gastroscopy to help find the cause of your symptoms.

A gastroscopy is a technique to look directly into your gullet (oesophagus), stomach and first part of the small bowel called the duodenum. This is to help find out what is causing your problems.

The instrument used for this procedure is a gastroscope. The gastroscope is a thin, flexible tube. It has a bright light on the end and is passed through your mouth and down into the
stomach. In many circumstances the tube used can be very thin and be passed through the nose at your request. The advantages of this technique are that it causes very little retching, does not need throat spray and is done without sedation. You can talk throughout. This is called nasoendoscopy and a small amount of local anaesthetic is applied to the nostrils only. It causes less sore throat but can cause a small nose bleed occasionally. Nasoendoscopy is not always suitable but if you would prefer to try this method please ask the nurse who greets you at your appointment, or at pre-assessment or telephone 0121 371 3838 before your appointment. If passage through the nostril is not possible for any reason you can still try the usual route as described above.

Either technique allows samples of tissue (a biopsy) to be taken painlessly for testing later, as well as many other procedures.

What are the risks associated with this procedure?

- Perforation of the oesophagus (making a hole) is an extremely rare complication of approximately 1 in 10000 cases. If a perforation does occur, there is the possibility that surgery may be required
- Aspiration of fluid from the stomach into the lungs may cause a cough
- Sore throat may occur for up to 24 hours following the procedure
- There is a small possibility of damage to teeth. Please ensure you inform staff of any dentures, loose teeth and caps or crowns
- Sedation can occasionally cause problems with allergic reactions, respiratory problems, heart rate and blood pressure. If any of these problems occur, they are usually short lived
- In approximately 10% of people it may not be possible to
complete the procedure. This can be for a variety of reasons, including unsatisfactory emptying of the stomach, mechanical failure or toleration of the procedure.

Like all tests, this procedure may not always show up all abnormalities and on rare occasions, abnormalities may not be identified.

The person doing the test will discuss any questions you may have about the risks.

What are the side effects of the procedure?
You may have bloating and abdominal discomfort for a few hours.

What are the benefits of this procedure?
Gastroscopy is the only test that allows direct inspection and sampling of the bowel wall.

What are the alternatives to this procedure?
Barium Meal, Barium Swallow or CT scan can show the stomach lining but cannot take biopsy samples. Even though you are having a gastroscopy, you may still require one of these other procedures at a later stage.

Preparing for a gastroscopy
Please read the following information carefully. If you do have any queries, contact the Endoscopy Unit on 0121 371 3838 or discuss with the staff on your arrival for your appointment. Also enclosed is a consent form. Please read this carefully and ensure you bring it with you to your appointment where it will be filled in and signed. You will be offered a copy of the consent form.
once it has been completed.

Please telephone the unit on 0121 371 3838 for advice if you are taking Warfarin, Clopidogrel (Plavix) or any other drugs that thin the blood like Dabigatran, Apixaban, Rivaroxaban, Eptifibatide, Prasugrel or Ticagrelor.

Please bring a complete list of all the medicines that you take when you come for your procedure.

**Please inform us if you think you have an allergy or think that you may be pregnant.**

To allow a clear view, the stomach must be empty so please follow these instructions:

- Do not have anything to eat for at least 6 hours before the test
- Do not drink milk for 4 hours before the test as this will line the stomach and prevent clear views
- Drink clear fluids (water, black tea, black coffee, squash) for up to 2 hours before the time of your appointment

**If you have diabetes**

If you are diabetic and use insulin or tablets, please contact the booking team on 0121 627 2209 so that you can be offered an appointment at the beginning of the list. At this time, the clerical team will be able to transfer your call to the clinical team who will be able to offer advice about managing your blood sugar levels during the period you are not able to eat.
When you arrive at the hospital

Please report to the reception desk in the endoscopy unit where the receptionist will check your details.

- Please do not bring any valuables with you
- Please do not wear any nail varnish, lipstick or jewellery

You will be taken to a private room where the procedure will be explained to you in detail, to make sure you understand the benefits and possible risks, as detailed in this leaflet. You will be given the opportunity to ask any questions that you might have about the procedure. Provided you are satisfied for the procedure to be performed, you will be asked to sign the enclosed consent form confirming your understanding and acceptance of the procedure. (This may already have taken place before the day of your procedure, if you were offered pre-assessment. You may also have been sent or shown a DVD describing the procedure.)

The form also asks for your consent to further procedures that may be necessary, including taking tissue samples (biopsies) that may be helpful in diagnosing your problem. Tissue may be used for research purposes but you can request that samples are not used for this purpose. This will be fully discussed prior to the procedure.

You will be asked to wear a hospital gown over your normal clothing.

There are two options that we can offer to help you with this procedure, throat spray or sedation

Throat spray

This procedure is usually carried out using a throat spray which numbs the back of the throat. It has a bitter taste and may feel hot when you swallow it. It has a very rapid effect and you will notice a loss of sensation to the back of the throat and the
tongue. Choosing the throat spray means that once you have recovered and feeling well you can leave the unit and make your own way home or back to work.

You will not be able to have anything to eat or drink for about an hour following the procedure, until the effects of the spray has worn off. After this, you can eat and drink normally.

**Sedation**

If you choose to have a sedation, an intravenous sedative is usually given through a small needle in your hand or arm. Sedation will make you relaxed and you may not remember the procedure. You will not be put to sleep. If you opt for sedation, you will need to have a responsible person to accompany you home and you will need someone to stay with you for 24 hours after the procedure. Advice about the care following the procedure is discussed later in this booklet.

**The procedure**

You will be taken into the procedure room where the endoscopist and the nurses will introduce themselves check that your details are correctly recorded and you will have the opportunity to ask any final questions. You will be asked again whether you understand the procedure you are about to undergo and check you are willing to proceed with the test. The endoscopist will also sign the consent form.

If you have opted for sedation, a small plastic cannula will be inserted into a vein in your hand or arm. You will be asked to lie on your left side and your heart rate, oxygen levels and blood pressure will be monitored. You will be given oxygen during the procedure though small plastic tubes which sit just inside your nostrils.

If you have chosen sedation, you will be asked to lie on your left side and your heart rate, oxygen levels and blood pressure will be monitored. The sedation will then be given.
If you have chosen throat spray, this will be administered and you will be asked to lie on your left side and your heart rate, oxygen levels and blood pressure will be monitored.

A nurse will stay with you throughout the procedure. To help minimise any damage to your teeth or the scope, a small plastic mouthpiece will be placed between your teeth. The endoscopist will pass the scope over the back of your tongue and down into your stomach. This procedure will not interfere with your breathing. The test is not painful, but the tube presses on the back of the throat and can make people retch during the procedure and a slight sore throat often follow lasting about 24 hours or so. The air that is blown into the stomach can provoke belching and bloating which wears off very quickly after the procedure. The procedure itself last a few minutes only.

If you have chosen nasoendoscopy, a 4mm endoscope will be passed through a nostril, and oxygen will be given through the other nostril.

The procedure will usually take between 5 and 10 minutes. Once completed, you will be transferred to our recovery area where you will be monitored until you are ready to leave.

How long will I be in the endoscopy department?

You should expect to be in the department between 3-4 hours depending on how busy the department is and whether you have opted for throat spray or sedation. Emergencies may have to take priority. We will endeavour to keep you informed of any expected delays.

The appointment time you have been given is the time you should arrive at the unit. It is not the time of your procedure. Sometimes a person who has arrived after you may be taken through to a procedure room before you. We have at least four procedure rooms running at the same time and their
appointment may be for a different room. It does not mean that they have been given priority over you.

**Going home after the procedure**

If you have had sedation, and depending what therapy has been carried out during your procedure, you will remain in the unit to rest for up to 2 hours until you have recovered adequately and we are satisfied that it is safe to send you home. It is essential that a responsible adult accompanies you home by car or taxi – public transport is not suitable.

When you get home, you should rest for the remainder of the day. Someone should stay with you for the rest of the day and overnight. It is advisable to have the next day off work. During the first 24 hours following sedation you must not:

- Drink alcohol
- Drive any vehicles (including riding a motorcycle or bicycle)
- Take sleeping tablets
- Operate machinery or electrical items (including a cooker or kettle)
- Sign any legally binding or important documents
- Work at heights (including climbing ladders or onto chairs)

Please note that sedation can impair your reflexes and judgement for up to 24 hours even when you feel fully awake.

If you have had throat spray, again depending upon what therapy has been performed, you will be in the unit for about an hour. After this time, you are free to travel home by any type of transport and you do not need anyone to accompany you. Once the effects of the throat spray wears off, you are free to eat and drink as normal and carry out any normal activities that you choose.
When will I know the results?

Before discharge, you will be given a brief outline of the test results. If a biopsy or polyp has been removed, the laboratory results will take longer, about 10-14 days. The nurse will advise you to discuss the details of the results and any necessary treatment with your GP or hospital specialist. You may be offered a copy of the endoscopy report for your own information, and a copy will be posted to your GP surgery, or you may take this copy to hand deliver to them yourself.

General points to remember

• If you can not keep your appointment please notify the booking department on 0121 627 2209 as soon as possible to enable another patient to be offered your appointment time and for your appointment to be rebooked

• It is our aim for you to be seen and investigated as soon as possible after your arrival. However, the department is sometimes very busy and your procedure may be delayed. Emergency patients will obviously be given priority

• The hospital cannot accept any responsibility for loss or damage to personal property when on the premises

• If you are having sedation, please arrange for a responsible adult to collect you and stay with you overnight

• Please note that the unit is a mixed sex environment. However, every effort will be made to maintain your privacy and dignity whilst you are in the department

• Following the procedure, if you have any problems with persistent abdominal pain or bleeding please contact your GP immediately, informing them that you have had an endoscopy

• If you are unable to contact or speak to your doctor, you must go immediately to your local Emergency department (A&E). The telephone number for the Emergency Department at Queen Elizabeth Hospital Birmingham is 0121 371 2604
To contact us by telephone before your appointment

Endoscopy Unit, Queen Elizabeth Hospital Birmingham

Clinical area:
Telephone: 0121 371 3838 available Monday-Friday 09:00-17:00

Booking Office:
Telephone: 0121 627 2209 available Monday-Friday 09:00-17:00

Please keep this information safe in case you wish to refer to it in the future.

Please use the space below to write down any questions you may have and bring this with you to your next appointment.

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The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk/health-talks.htm or call 0121 371 4323.

Contact telephone numbers:

Booking team
Telephone: 0121 627 2209

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Queen Elizabeth Hospital Birmingham
Mindelsohn Way, Edgbaston
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