

Diagnostics Procedure

Colonoscopy

1. What is a colonoscopy?

A colonoscopy is the most frequently performed test to investigate the large bowel otherwise known as the large intestine or colon. This is an endoscopic test that allows the doctor to look directly at the lining of the bowel using a flexible 'telescope'.

A colonoscopy can be used to diagnose diverticular disease, inflammatory bowel disease, polyps and cancers, as well as a number of less common bowel conditions. The procedure is used to help doctors diagnose unexplained changes in bowel habits (for example constipation or diarrhoea), abdominal pain, bleeding and weight loss. Biopsies can also be taken during the procedure and polyps can be removed.

2. What are the advantages of a colonoscopy?

- All the bowels can be seen directly.
- Biopsies can be taken where necessary.
- Polyps can be removed – therapeutic colonoscopy.
- Results are available straight away.
- Patients can watch the whole procedure if they wish.

3. What are the potential risks?

- **Perforation:** This is one of the most serious risks. It involves the accidental puncturing or tearing of the colon wall. While rare, it can lead to infection and might require surgery to repair.
- **Bleeding:** Some bleeding may occur during or after the procedure, especially if polyps are removed. Minor bleeding often stops on its own, but in rare cases, it may require further intervention.
- **Adverse reaction to anaesthesia:** If sedation or anaesthesia is used, there's a small risk of an adverse reaction. This may include difficulty breathing, a drop in blood pressure, or other anaesthesia-related complications.
- **Infection:** Infection risk is low, but it can happen if bacteria from the colon enters the bloodstream during the procedure.
- **Incomplete examination:** In some cases, the colonoscopy may not reach the entire length of the colon due to technical difficulties or a patient's anatomy.
- **Allergic reaction:** There is a small risk of an allergic reaction to medications or materials used during the procedure.
- **Respiratory complications:** In rare cases, sedation can lead to temporary respiratory complications, such as a decrease in oxygen levels or difficulty breathing.

Continued overleaf.

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4. How to prepare

You will receive written instructions about the test beforehand. You will be given some strong laxatives to clear out the bowel – Moviprep or less frequently Picolax is used. You must follow the instructions carefully and you should drink as much clear fluid as possible.

5. What happens after?

A colonoscopy takes about 30 minutes to complete. You may feel bloated and have some wind-like pains afterwards. These usually settle very quickly. The consultant will be able to tell you the result straight after the procedure. The pathologist will process any tissue samples taken and the results will be available within a few days. If you have not had sedation or used Entonox (gas and air) instead of sedation, you should be able to leave soon afterwards and you can drive yourself home. If you have had sedation or an anaesthetic for the procedure you will need to recover fully before going home. You may be affected for up to 24 hours. A responsible adult must be present when you return home. You should not do any of the following within 24 hours:

- Drive a car.
- Operate heavy machinery.
- Carry hot objects i.e., kettles or saucepans .
- Drink alcohol or smoke .
- Take sleeping tablets .
- Sign any legally binding documents.
- Work at heights (which includes standing on chairs or step ladders).

If you have any problems or queries you should contact the ward from where you were discharged.