

## HAVING A FLEXIBLE SIGMOIDOSCOPY

**The Endoscopy Department**  
Harrogate and District Foundation NHS Trust  
Lancaster Park Road  
Harrogate HG2 7SX



### Helpline/Enquiries

**For appointment/ booking queries please call: 01423 553769.**

**For any medical queries (e.g. medications, bowel preparation, diet or sedation) please call: 01423 553370.**

### On the day of your procedure

- If you have any concerns during your time in the Endoscopy Department please ask to speak with the Nurse in Charge. The Nurse in Charge will be wearing a Red badge and is normally a Senior Nurse.

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- Your appointment time and date are detailed on the enclosed admission letter. If you are unable to keep this appointment or have any other queries, please ring the helpline number above.
- We try to keep delays to a minimum. Sometimes procedures take longer than expected or emergencies arise, delaying the time of your procedure. We will endeavour to keep you informed of any delays where possible.
- **PLEASE NOTE YOU MAY BE IN THE DEPARTMENT FOR UP TO 4 HOURS.**
- Please bring the telephone number of the person picking you up, so that we can notify them when you are ready to go home.
- Most patients have a flexible sigmoidoscopy with Entonox. However, sedation is available if it is needed.
- If you are pregnant, have had a heart attack, stroke or surgery in the last 6 weeks please phone the department as we may need to delay your procedure.
- Long distance travel is not advised for 48 hours following the procedure. For air travel this is 14 days. Please ring the unit if this is a problem.
- Please bring a dressing gown and slippers.

## HAVING A FLEXIBLE SIGMOIDOSCOPY

### WHY DO I NEED A FLEXIBLE SIGMOIDOSCOPY

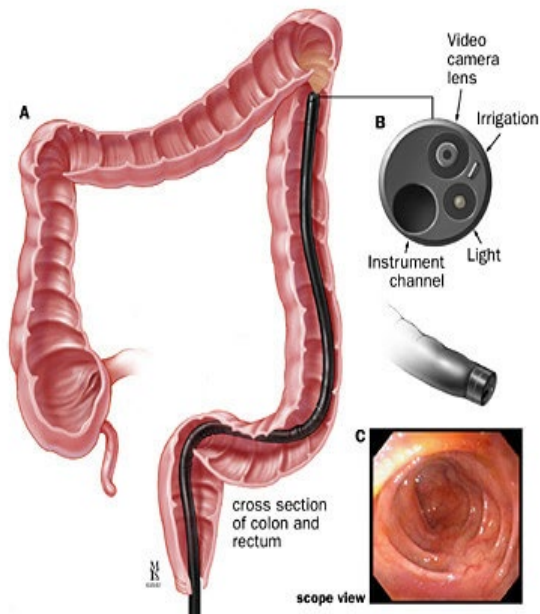
You have been referred for a flexible sigmoidoscopy to help find the cause of your symptoms. The aim of the procedure is to assess the lining of your bowel to see whether there are any problems and decide if further treatment is necessary.

### WHERE IS THE ENDOSCOPY DEPARTMENT?

When entering Harrogate District Hospital via the front entrance, go straight ahead and take the first stairs or lift on the left hand side up to the first floor.

Turn left and follow the main corridor, about half way down you will see the Endoscopy Unit sign posted on your right.

### WHAT IS A FLEXIBLE SIGMOIDOSCOPY?



A sigmoidoscopy is an extremely useful test that examines the first part of your large bowel (colon).

A long flexible tube with a camera is passed through your back passage to look at the lower part of your colon

We may take biopsies (a small tissue sample) or remove polyps (small growths of tissue), which are sent to the laboratory for examination. These are painless procedures.

If haemorrhoids (piles) are found during the procedure, they may be treated.

## HAVING A FLEXIBLE SIGMOIDOSCOPY

### WHAT ARE THE RISKS OF HAVING A FLEXIBLE SIGMOIDOSCOPY?

A flexible sigmoidoscopy is considered to be a safe procedure, but occasionally there can be side effects and complications. These include:

- Bloating and abdominal discomfort (this is not unusual for a few hours).
- Reactions to the drugs if given which may require you to stay in hospital.
- Very unusually (1 in 5,000) there is a risk of bleeding or perforation (tearing) of the bowel.
- It is recognised that although normally an accurate test, in a small percentage of people (about 5%) a flexible sigmoidoscopy can miss a significant abnormality.

Very rarely a blood transfusion or surgery is needed to put right these types of complications.

You will be cared for by a skilled team of doctors, nurses and other healthcare professionals who are involved in this type of procedure every day. If problems arise, we will be able to assess them and deal with them appropriately.

### MAKING YOUR PROCEDURE MORE COMFORTABLE

The procedure is usually completed in 10 to 15 minutes, although it may take longer if polyps are being removed, or your bowel has more twists and bends than average. You should expect to be in the department for up to four hours. Please bring a contact number for the person collecting you.

Most patients having a flexible sigmoidoscopy don't have any pain relief or use Entonox. However sedation can be given if needed.

#### **Entonox**

Entonox is well established sedative and pain relieving gas mixture which consists of two gases, 50% Nitrous Oxide and 50% oxygen and is more commonly known as Gas and Air.

It is controlled by you as you take it through a mouth piece, which you will be shown how to use before your procedure begins. As you continue to use the Entonox you may become light-headed or drowsy. The Entonox gas only works when you breathe it in. When you stop breathing the gas, the effects wear off very quickly.

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**Entonox should not be used if you have the following:**

- Had any recreational drugs or alcohol as Entonox may increase the effects of these
- Pneumothorax (this is when air leaks into the space between the chest wall and the outer tissue of the lungs. It is often caused by an injury)
- Have a blockage in the bowel
- Have had a head injury
- Recent surgery to the ear
- If you have a tracheostomy
- Entonox cannot be used if you have been diving in the last week.

As Entonox leaves your system during your recovery period, you will be able to leave the department after about thirty minutes, without someone to accompany you. You may drive home and return to work the next day.

### **Sedation**

If you choose sedation, it will be given through a cannula inserted into a vein.

**Sedation is not a general anaesthetic** but will help you relax and may make you feel sleepy. You may also forget the test and what is said to you afterwards as a side effect of the sedation.

Once you get home, it is important to rest quietly for the rest of the day and **you must not drink any alcohol.**

**You should not be left alone for at least 12 hours after the procedure. We do recommend you have someone available for 24 hours** as the effects of sedation can last up to 24 hours. We advise you not to work the following day.

**If you have sedation you MUST have someone to collect you and stay with you for a minimum of 12 hours (preferably 24 hours).**

## **If you fail to make appropriate arrangements we cannot give you sedation**

**Sedation: For 24 hours after the procedure, you should not:**

- **DRIVE A VEHICLE** (This is illegal if you have had sedation.)
- **SIGN ANY LEGALLY BINDING DOCUMENTS**
- **TAKE SLEEPING TABLETS** or sedatives
- **WORK AT HEIGHTS – INCLUDING LADDERS**
- **USE MACHINERY** including home appliances e.g Kettle
- **DRINK ALCOHOL**

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### WHAT PREPARATION DO I NEED?

**Enema instructions- Do not eat or drink after you have had the enema** - as it will stimulate your bowel.

To allow us to see clearly inside your bowel, it must be as clear as possible of food and fluid. An enema is a quick, convenient way to empty your lower bowel.

Give the enema one hour before you leave home for the examination, making sure you are near a toilet.

- Pull off the tip from the nozzle, holding the enema upright so it does not spill.
- Lie on your left-hand side on an old towel.
- Gently insert the nozzle into your back passage.
- Squirt the contents in, remove the nozzle and stay laying down.
- Try to keep the liquid in for 5-10 minutes.
- Go to the toilet and empty your bowels. You may need to go a few times.

Occasionally some people feel mild cramps and a little dizzy. Lie down until you feel better.

Occasionally a stronger preparation is needed for this you will receive a box containing your bowel preparation, which must be taken before your procedure. You will be given a sheet advising you how to take this bowel preparation. Please read this carefully, as some bowel preparations require you to make adjustments to your diet for a few days prior to taking the medication. A sheet with additional information regarding the bowel preparation can be found in the box along with the sachets of preparation.

### **General Information**

Please do not bring valuables and only a small amount of money with you (You may need a small amount of money to cover the cost of parking, and any prescription if necessary). Harrogate and District NHS Foundation Trust cannot accept responsibility for these items.

Please do not use any body lotion on the day of your procedure.

You may find wearing loose-fitting casual clothes more comfortable to travel in.

We sometimes have trainee doctors and endoscopists who work under supervision of a senior endoscopist. You can decline to have a trainee and this will not affect your care or treatment.

We aim to run the Endoscopy lists to time, however the time taken to complete procedures varies and may lead to delays. We also need to see emergency patients which may delay a list.

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If you have an ileostomy please do not take any bowel preparation until you have taken advice from nursing staff on 01423 553370.

Please do not eat seeds or nuts for up to a week before your procedure, if possible as they can block the scope.

**Please bring a full list of medication with you.**

### **ANTICOAGULANT ADVICE (drugs that thin your blood)**

If this is your **first procedure** it will normally be a diagnostic procedure (to find out why you are having symptoms) please follow the advice below.

- |                            |                                       |
|----------------------------|---------------------------------------|
| • Aspirin                  | - omit when taking bowel prep         |
| • Dipyridamole (Persantin) | - keep taking as usual                |
| • Clopidogrel (Plavix)     | - keep taking as usual                |
| • Ticagrelor (Brilique)    | - keep taking as usual                |
| • Prasugrel (Effient)      | - keep taking as usual                |
| • Apixaban (Eliquis)       | - do not take on the day of procedure |
| • Dabigatran (Pradaxa)     | - do not take on the day of procedure |
| • Rivaroxaban (Xarelto)    | - do not take on the day of procedure |
| • Edoxaban (Lixiana)       | - do not take on the day of procedure |

These are the more common blood thinning drugs. Please ring us if you are on any others.

**If you are on Warfarin please bring your anticoagulation record with you. You need your INR checked at your GP Practice two days before your appointment. If this is a problem please ring the department.**

If you are having a **second** more complex procedure, for example, if a polyp needs removing, you will have been asked to stop this medication by a consultant or an endoscopist.

**If you are unsure of anything please ring the department. 01423 553370.**

- **Take essential medication if you can take it on an empty stomach.**
- Please avoid taking iron tablets or eating seeds and nuts for one week before the procedure as this can affect the visibility of your colon.
- If you have a pacemaker or other implanted cardiac device, please telephone the Endoscopy helpline to inform the staff.

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- If you have sleep apnoea and have a CPAP machine, please ensure you bring this with you. Please telephone the Endoscopy helpline on 01423 553370 to inform the staff, as it may be suggested that your procedure will be safer without sedation.
- Patients with sleep apnoea will need to remain in recovery for an extended period.

### WHAT HAPPENS WHEN I ARRIVE IN THE ENDOSCOPY DEPARTMENT?

When you arrive a nurse will greet you, take some details and discuss and explain the procedure. Please feel free to ask about anything that may be worrying you regarding the procedure.

If, having read this leaflet, you are still unsure about any aspect of the procedure, you will be able to discuss it with the endoscopist before signing the consent.

Once the nurse has completed the necessary paperwork you will be asked to change into a hospital gown, dignity shorts and dressing gown. You will then be shown to a waiting area.

Prior to taking you to the Endoscopy Room, the endoscopist will discuss the procedure with you, will discuss any problems and complications in relation to the procedure and answer any remaining questions you might have prior to you signing the consent form.

### WHAT HAPPENS IN THE PROCEDURE ROOM?

Firstly, the nurse in charge will go through the safety checklist with you.

You will then be asked to lie on your left-hand side on the trolley. If you are having sedation, it will be given at this point. The nurse who will be looking after you during the procedure will attach a small device to your finger to monitor your pulse rate and oxygen level.

When the sigmoidoscope has been gently passed in your anus, CO<sub>2</sub> (carbon dioxide) will be passed through it to expand your bowel and give a clear view. You may experience bloating and cramp like discomfort.

On average the test takes 10-15 minutes to complete, but can take longer.

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### WHAT HAPPENS AFTER THE PROCEDURE?

After the procedure, you may feel a little bloated, this usually settles quite quickly.

You will be transferred to the recovery room and looked after by a trained nurse until you are fully recovered and ready to go home

#### **If you have had sedation**

It is necessary for you to remain in the department for a short time to recover from the sedation, usually one hour. We will give you a drink and biscuit.

Although you may feel fine after the procedure, the sedatives used can remain in your bloodstream for up to 24 hours. You **must** have someone to collect you from the endoscopy unit and take you home, and a responsible adult must be with you for at least 12 hours.

#### **If you have had Entonox**

You may drive home and return to work the next day.

#### **Your results**

A report will be sent to the doctor who requested the procedure and your GP. A final diagnosis may depend on the results of biopsies which can take some time before we can let you know the results.

Before leaving the Endoscopy Department you will be informed about the findings, and whether a follow up appointment is needed. This information will be given in writing and verbally. You may want a relative or carer present, especially if you have had sedation.

If you require further information or advice regarding your procedure, please contact your GP or the Endoscopy Department on 01423 553370