



Gastroscopy

Information for patients from the Trust's Endoscopy Units

This information leaflet is for patients who are having a gastroscopy examination. It explains what is involved and any significant risks that there may be.

If you do not attend your appointment without telling the Endoscopy Unit in advance you may be removed from the waiting list.

Students and trainees, supervised by qualified staff may be involved in your care. If you do not want students to be present, please tell the endoscopist or nurse in charge.

The time stated is your booking in time **not** your procedure time. Please tell any friends or relatives who come with you for your procedure.

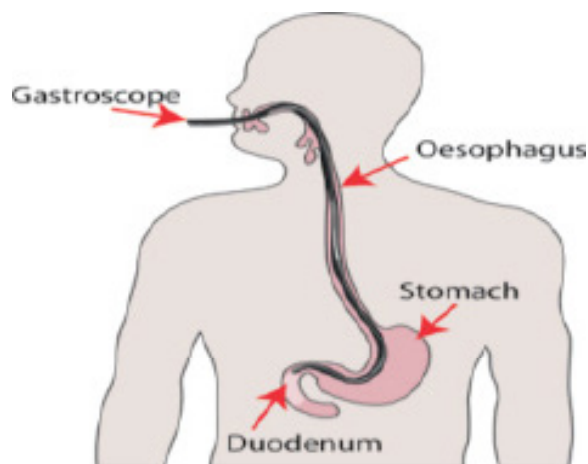
The test itself lasts about five to 10 minutes and normally you will be able to go home 45 minutes later. Occasionally, if there are emergency cases or very difficult cases the start of your test may be delayed and you may be in hospital for up to four hours.



What is a gastroscopy?

It is an examination of the inside of your oesophagus (gullet), stomach, and duodenum (the first bend of the small intestine). **See the diagram.**

A thin, flexible tube approximately the size of a woman's little finger (a gastroscope) is passed through your mouth into your stomach. The tip of the endoscope contains a light and a tiny video camera so that the endoscopist can see inside your gut, allowing the endoscopist to see what might be causing the symptoms that you are experiencing. (This procedure is sometimes called an endoscopy).



How should I prepare for my test?

- For this examination to be successful and for the endoscopist to have a clear view, your stomach must be empty.
- **It is important to have nothing to eat or drink for six hours before your test.**
- If you are a **diabetic or haemophiliac**, please phone the Endoscopy Unit booked for your procedure for specific advice.
- If you are taking warfarin, clopidogrel, or other blood thinning medications, please tell us at least one week before your test.
- If you have a pacemaker or ICD, please let us know at least one week before your test.
- The test may be affected if you are taking certain medications for your stomach. Stop taking the following drugs one week before your test **if you have not been diagnosed with an ulcer or Barrett's Oesophagus:**
 - cimetidine (Tagamet)
 - ranitidine (Zantac)
 - nizatidine (Axid)
 - lansoprazole (Zoton)
 - omeprazole (Losec)
 - pantoprazole (Protium)
 - rabeprazole (Pariet)
 - esomeprazole (Nexium)
 - famotidine (Pepcid).
- Continue to take your other medications with a sip of water.
- Please bring a list of them with you to the unit.
- If you have any queries about your medication please ring Endoscopy. **It is especially important to remember to bring any asthma inhalers or angina sprays with you.**
- **Do not bring valuables to the unit.** Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

What happens when I arrive at the hospital?

- Please report to the reception of the Endoscopy Unit.
- A nurse will check your details, blood pressure, and pulse. If you are allergic to anything (such as medicine, latex, plasters), please tell the nurse.
- **Please do not hesitate to ask any questions you may have.**
- You will have the test you will be undergoing explained to you during your admission. You will then be asked to sign a consent form. Remember, you can withdraw your consent for treatment at any time.
- You do not need to change but should remove your coat or jacket.
- You will be asked to remove any spectacles, contact lenses, tongue studs, and dentures (if you have them).
- A nurse will stay with you throughout your examination.

What does the examination involve?

The nurse or endoscopist will discuss with you whether you will have a **local anaesthetic spray** (numbing) on the back of your throat; this has a bitter taste. **You can also have an injection of sedative** into a vein in your hand or arm to help you relax. This will make you feel relaxed but rarely makes you fall asleep. (This needle will be left lightly strapped to your hand/arm until you are recovered from the procedure).

- You will have a device attached to your finger, which monitors your heart rate and breathing.
- A cuff will be placed on your arm to monitor your blood pressure (please tell the nurse if there is a reason why a certain arm cannot be used).
- Then, while you are lying on your left side, a small mouthpiece will be placed in your mouth and if you have sedation you will be given oxygen.
- The endoscopist will gently insert the gastroscope into your stomach. **This is not painful and will not make breathing or swallowing difficult**, but you may feel like retching and feel uncomfortable during the test.
- Your stomach will be gently inflated with air to expand it so that the lining can be seen more clearly. The air is sucked out at the end of the test.
- A biopsy (a small sample of the stomach lining) may be taken during the examination to be sent to the laboratory for more tests. **You cannot feel this.** (A video recording and/or photographs may also be taken).
- The nurse may need to clear saliva from your mouth using a small suction tube.
- Afterwards the gastroscope is removed easily.

What happens after my examination?

You will return to the recovery area to rest.

- If you had a **sedative injection** you will need to rest for about 45 minutes.
- On recovery you can eat and drink as normal.
- If you had the **local anaesthetic throat spray** you can have a drink as soon as your swallowing is back to normal (usually after about 20 to 60 minutes).
- The nurse will tell you the result of the examination before you go home. Any biopsy results will take longer.
- A letter will be sent to your GP with the results.

Going home

- **If you had the sedative injection you must have a responsible friend or relative to take you home and stay with you for 24 hours.**
- You **must not** drive, drink alcohol, operate machinery (including the oven and kettle), or sign important documents, for 24 hours following your test.
- You may have a mild sore throat, but this will pass and is nothing to worry about.
- If you had the **throat spray anaesthetic only** the restrictions above do not apply.
- You can eat and drink as normal.

Are there any risks?

This examination is very safe, but there are some risks associated with any procedure.

- **Damage** to crowned teeth or dental bridgework.
- **A reaction to the sedative.** The sedative can affect your breathing making it slow and shallow.
- **Perforation**, which is a tiny tear in the gullet or stomach. This would need repairing involving a short stay in hospital.
- A small amount of **bleeding** may occur following a biopsy.
- **Fever** (raised temperature).
- There is a slightly increased risk of developing a **chest infection** after this procedure.
- A feeling of **bloating** due to the air we need to insert so we can clearly see where we are.

Please talk to your endoscopist before your examination if you have any worries about these risks.

Any further questions?

Please phone the Endoscopy Unit. The Units are open Monday to Sunday 8am to 6pm:

- William Harvey Hospital, Ashford Telephone: 01233 61 62 74
- Kent and Canterbury Hospital, Canterbury Telephone: 01227 78 30 58
- Queen Elizabeth the Queen Mother Hospital, Margate Telephone: 01843 23 43 70

If you have any questions between 6pm and 8am Monday to Sunday then contact Accident and Emergency (A&E) on:

- A&E, William Harvey Hospital, Ashford Telephone: 01233 61 62 07
- A&E, Queen Elizabeth the Queen Mother Hospital, Margate Telephone: 01843 23 50 30

A short film outlining what patients can expect when coming to hospital for an endoscopy is available on the EKHUFT web site www.ekhufft.nhs.uk/endoscopy/

If you develop any severe pain in the neck, chest, or abdomen within the first 24 hours of your procedure please phone Accident and Emergency (see telephone numbers above).

Our Units are regularly inspected and audited; please ask if you want any information about our performance standards. You can also visit www.patientopinion.co.uk

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhufft.nhs.uk/patientinformation