

# Having a gastroscopy – examination of the oesophagus, stomach and small intestine

**This leaflet explains more about having a gastroscopy, including the benefits, risks and any alternatives and what you can expect when you come to hospital. If you have any further questions, please speak to a doctor or nurse caring for you.**

## **What is a gastroscopy?**

A gastroscopy is an examination that allows us to look directly at the upper part of the gastrointestinal tract: the oesophagus (tube that food passes down to reach the stomach); the stomach and around the first bend of the small intestine (duodenum).

In order to do this, a thin flexible tube called a gastroscope or endoscope, which has a light at one end, is used. It is passed through the mouth, down the oesophagus and into the stomach by a specially trained doctor or nurse, called an endoscopist. The tube is thinner than your little finger. It will not get in the way of your breathing at any time, as it passes down your oesophagus and not your windpipe.

Sometimes biopsies (small tissue samples) are taken and sent for analysis. The biopsies taken are about the size of a match head and will not cause you any pain.

## **Why should I have a gastroscopy?**

Your doctor/specialist nurse has recommended that you have a gastroscopy to find out the cause of your symptoms, such as:

- pain in the upper abdomen (tummy)
- difficulty swallowing
- recurring indigestion
- vomiting
- bleeding
- recurring heartburn.
- monitoring of a longer term condition.

It can also be used to check a previously diagnosed gastrointestinal condition.

A gastroscopy can help to diagnose:

- ulcers
- inflammation
- infection
- the presence of helicobacter pylori (bacteria that can cause ulcers, gastritis and gastric cancer)
- celiac disease (inability to digest gluten)
- cancer.

## **What are the risks?**

A gastroscopy is a safe test – serious complications are uncommon. Occasionally the gastroscope can damage the lining of the oesophagus, stomach or intestine. This can cause:

- bleeding
- infection
- rarely, a tear in the oesophagus or stomach.

If this happens to you, you may need to have a blood transfusion, come into hospital or have surgery to treat the problem.

Your doctor or specialist nurse will discuss the possible complications with you before you sign the consent form.

## **Are there any alternatives?**

An alternative is to have a barium meal. This involves having an X-ray after drinking some barium liquid. As X-rays can't go through barium, the outline of your stomach shows up on the X-ray picture. However, you may still need a gastroscopy if any abnormalities are found. A barium test involves radiation and is less accurate than an endoscopy. However, samples or biopsies of the gut or polyps cannot be removed during a barium test, so you may still need a gastroscopy.

## **How can I prepare for a gastroscopy?**

To make sure the endoscopist performing the gastroscopy has a clear view, your stomach must be completely empty. Therefore, you must not eat or drink anything for at least six hours before the test.

When you arrive in the unit the receptionist will ask you to sit in the waiting area until you are seen by a nurse, who will ask you about your medical history. Please tell the nurse if you have had any reactions or allergies to other examinations in the past.

You do not need to get changed for the procedure but we may ask you to put a gown on over your clothes to protect them. Once you are ready you will be taken to the second waiting area, signposted, 'sub wait area.' Your endoscopist (the doctor or nurse carrying out the procedure) will explain more about the procedure and answer any questions you may still have.

You should have had a chance to discuss any medications you are taking with one of our nurses or doctors before your procedure. If you are taking anti-platelet medication or anticoagulant medication to prevent the formation of blood clots (such as aspirin or clopidogrel, warfarin, rivaroxaban or dabigatran); sedatives, chronic pain medication, or medications for diabetes, please let the doctor or nurse know in good time before the date of your procedure. You should continue to take all of your medications as normal, unless you have been told otherwise by the doctor or endoscopy nurse.

## **Giving my consent (permission)**

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

You should receive the leaflet, **Helping you decide: our consent policy**, which gives you more information. If you do not, please ask a member of staff caring for you for a copy.

## **What happens during a gastroscopy?**

The test will take place in one of the procedure rooms, where a nurse will ask you to remove your shoes, loosen any constricting clothing and remove any false teeth or glasses. You will need to keep your belongings with you at all times.

You will be given either sedation, or an anaesthetic throat spray for the examination. Your endoscopist will have already have discussed with you which one you would prefer. The sedation will not put you to sleep, but will make you feel drowsy and relaxed. The anaesthetic spray will only numb your throat.

If you decided to have sedation, then a small needle will be inserted into your arm or hand and you will be given an injection through this.

You will be placed on your left side on a trolley. A nurse will stay with you throughout the examination. To keep your mouth slightly open, a mouthpiece will be placed between your teeth. The gastroscope will be gently inserted into your mouth and passed down into the stomach. If you have excess saliva in your mouth, the nurse will clear this using a sucker.

The endoscopist may pass some air down the gastroscope to get a clearer view. This may make you feel slightly bloated but will not be painful.

Sometimes a biopsy (a sample of tissue) will be taken for analysis in the laboratory. The tissue is removed through the gastroscope using tiny forceps. Very rarely this is uncomfortable, but the discomfort should pass quickly.

The test usually lasts between five and fifteen minutes. When the examination is finished, the gastroscope will be removed quickly and painlessly.

## **What happens after a gastroscopy?**

After the procedure you will be taken to the recovery area. If you have had sedation, you will need to rest quietly until the sedative has worn off (usually a couple of hours). The nurse will check your blood pressure and pulse and offer you some tea and biscuits.

If you have not had sedation you will be taken to the discharge area where you will be given a copy of the test results and you will be able to leave the hospital straight afterwards. However, you will not be able to eat or drink anything until your swallow reflex returns which usually takes about 45 minutes. After this, you will be able to eat and drink as normal, unless the doctor or nurse tells you otherwise.

If you have sedation, you must have someone to escort you home and stay with you for 24 hours. He/she should come with you for the appointment or be contactable by phone when you are ready to leave. If you do not have an escort or have not arranged for someone to collect you, then your procedure will be cancelled. If you are unable to arrange someone to collect you, please contact us to discuss alternative arrangements.

## What do I need to do after I go home?

The sedation lasts longer than you may think and therefore you must not:

- drive or ride a bicycle
- operate machinery or do anything requiring skill or judgement
- drink alcohol
- take sleeping tablets
- go to the work
- make any important decisions, sign contracts or legal documents.

You should rest at home following your procedure and should be able to carry out your normal activities 24 hours after the test.

You should consult your GP or go straight to your nearest A&E department if you develop severe abdominal (tummy) pain, a fever or are vomiting or passing large amounts of blood after the test.

## When will I get the results?

The doctor or specialist nurse will often be able to tell you your results before you leave the hospital. If you have had a sedative, it is a good idea to have someone with you when the results are being discussed, as you may not remember all of the details afterwards, due to the sedative. If you have had biopsies taken the results may take up to two weeks to become available.

## Will I have a follow-up appointment?

If you have a follow-up appointment, this will be posted out to you for the next available clinic or if it is urgent, you will be given your appointment on the same day.

### Contact us

If you have any problems or concerns, please contact the **Endoscopy Unit** for advice:

**020 7188 7188 ext 54059** for St Thomas' Hospital or  
**020 71887188 ext 53499** for Guy's Hospital.

Monday to Friday 9am – 5pm.

If you need to change or cancel your appointment please ring 020 7188 8887.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.guysandstthomas.nhs.uk/leaflets](http://www.guysandstthomas.nhs.uk/leaflets)

### **Pharmacy Medicines Helpline**

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

**t:** 020 7188 8748 9am to 5pm, Monday to Friday

### **Patient Advice and Liaison Service (PALS)**

To make comments or raise concerns about the Trust's services, please contact PALS. Ask a member of staff to direct you to the PALS office or:

**e:** 020 7188 8801 at St Thomas'      **t:** 020 7188 8803 at Guy's      **e:** [pals@gstt.nhs.uk](mailto:pals@gstt.nhs.uk)

### **Knowledge & Information Centre (KIC)**

For more information about health conditions, support groups and local services, or to search the internet and send emails, please visit the KIC on the Ground Floor, North Wing, St Thomas' Hospital.

**t:** 020 7188 3416

### **Language support services**

If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.

**t:** 020 7188 8815      **fax:** 020 7188 5953

### **NHS Direct**

Offers health information and advice from specially trained nurses over the phone 24 hours a day.

**t:** 0845 4647      **w:** [www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)

### **NHS Choices**

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

**w:** [www.nhs.uk](http://www.nhs.uk)

### **Become a member of your local hospitals, and help shape our future**

Membership is free and it is completely up to you how much you get involved. To become a member of our Foundation Trust, you need to be 18 years of age or over, live in Lambeth, Southwark, Lewisham, Wandsworth or Westminster or have been a patient at either hospital in the last five years. To join:

**t:** 0848 143 4017      **e:** [members@gstt.nhs.uk](mailto:members@gstt.nhs.uk)      **w:** [www.guysandstthomas.nhs.uk](http://www.guysandstthomas.nhs.uk)

**Leaflet number: 2044/VER4**

Date published: January 2014

Review date: January 2017

© 2014 Guy's and St Thomas' NHS Foundation Trust