Flexible sigmoidoscopy and rectal bleeding clinic

This leaflet will explain what will happen when you come to attend the One-stop Rectal Bleed Clinic. If you have any questions or concerns, please speak to your doctor or nurse.

What will happen at the One-stop Rectal Bleed Clinic?
You will have a consultation with a specialist nurse/doctor about your symptoms.

You will then have a flexible sigmoidoscopy, where a soft, flexible tube with a camera at the end is passed through your anus (back passage) and up inside your bowel. This is done by a specially trained doctor or nurse (endoscopist), and will help to identify any causes for your symptoms.

At the end of this test it may also be necessary to use a small instrument, called a proctoscope, to check for and treat haemorrhoids (piles), if necessary.

What do I need to do to prepare for my appointment?
Your bowel needs to be empty so that the doctor or specialist nurse can see the lining of your bowel with the camera. To achieve this, you will need to use a single-dose, disposable phosphate enema. It is a clear fluid that is passed through your back passage and placed in to your rectum to clear the section of your bowel that will be examined during the test. You need to use this enema before you come for your examination. The enema kit and further instructions will be sent to you through the post.

If you have any questions or concerns, or you would prefer to have the enema at the hospital, please contact one of the nurses in the endoscopy unit (contact details at the end of this leaflet).

Speak to a doctor or a nurse in the unit before you use the enema if:
- you know if you have an inflammatory or ulcerative bowel condition
- your doctor has asked you to reduce your sodium (salt) intake
- you suffer from a heart condition, such as congestive cardiac failure (CCF)
- you are taking anti-platelet medication or anticoagulant medication to prevent the formation of blood clots (such as aspirin or clopidogrel, warfarin, rivaroxiban or dabigatran), sedatives, chronic pain medication or medication for diabetes.
- you are pregnant.

You should continue to take all of your medications as normal, unless you have been told otherwise by the doctor or endoscopy nurse.
What are the risks of a flexible sigmoidoscopy?
Serious complications are rare, affecting one patient in every 3,000. The most serious risk is the endoscope damaging your bowel during the test. This can cause an infection, bleeding or a perforation (tear) of the lining of the bowel. If this happens, your abdomen may become painful and bloated and you may need medicine or surgery to treat the problem. If a biopsy is taken or a polyp (small growths in the bowel) is removed during the test, you may pass a small amount of blood from your anus after the test. This should only happen up to 24 hours after the test and is usually equivalent to only a few teaspoons full.

Occasionally, the test may need to be stopped. This can happen if you find the procedure too uncomfortable, or if the bowel preparation did not empty your bowel completely. In this case, the test may need to be repeated or we may suggest an alternative procedure. Your doctor or specialist nurse will discuss these potential risks with you in more detail. Please ask questions if you are uncertain.

Before the procedure
When you arrive at the Endoscopy Unit, a nurse will come to prepare you for the procedure.

You will be asked to remove all of your clothing and change into a gown. You may want to bring your own dressing gown and slippers with you.

Consent – asking for your consent
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.

If you would like more information about our consent process, please speak to a member of staff caring for you.

During the procedure
This test is normally carried out without sedation or an injection of painkillers, but you can have sedation if you wish. This is medication that makes you sleepy but does not put you to sleep. Your endoscopist will explain this to you in more detail.

If you would like sedation, some extra conditions apply – please see the section What happens after a flexible sigmoidoscopy, later in this leaflet.

As an alternative to sedation you may wish to consider using Entonox® for pain relief. Entonox® is used to relieve pain during childbirth. It is also used by the ambulance service and in hospitals for a variety of procedures and conditions. Please ask the doctor or nurse for a copy of our leaflet Use of Entonox® for your procedure in the Endoscopy Unit.

The test takes about 10 to 15 minutes and a nurse will be present all the time. You will be asked to lie down on your left side on a couch, with your knees bent. The endoscope will then be inserted into your lower bowel through your anus. Air will be passed down a channel in the endoscope, expanding your bowel to make it easier to see the lining. This may make you feel slightly bloated and you may feel the urge to go to the toilet, but you will not need to as your bowel will be empty. Many people pass some wind during the test. This is perfectly normal and is nothing to be embarrassed about.
If any abnormalities are found, biopsies (samples) can be taken to be examined in the laboratory. Also, if polyps are present, your endoscopist can remove these using a technique called diathermy (electrical heating to burn away the polyps – you will not feel this).

**Will I feel any pain?**

You should not feel pain during the test, although you may have brief periods of discomfort, particularly when the endoscope is first inserted and when the scope passes around bends in your bowel. Occasionally the nurse will press gently on your stomach, or your position may be altered, to aid the passage of the scope.

**What happens after a flexible sigmoidoscopy?**

If you do not require an examination with a proctoscope or need your haemorrhoids (piles) banding, 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 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. You may still feel a little bloated from the air passed into your bowel during the procedure, but this should pass quite quickly.

The results of any biopsies or polyps taken during the test will generally be available within two weeks of the test. You and your GP will receive a letter with the results and recommendations for your care and treatment. You may be given an appointment to come back to the clinic. This will be posted to you.

If you have had sedation, you must have someone to escort you home and stay with you for 24 hours. They 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. In the first 24 hours after your examination, you should not:

- drive a car, motorcycle or a bicycle
- operate machinery or do anything requiring skill or judgement
- drink alcohol or take sleeping tablets
- go to 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.

**What is banding and how will it help me?**

Banding involves inserting a small instrument called a proctoscope into your anus. This is used to apply a tight elastic band around the internal section of your haemorrhoid, cutting off its blood supply. This makes the haemorrhoid fall off, relieving your symptoms within 10 to 14 days. The banding only takes a few minutes to perform, and is not painful. However, you may experience a dull ache for about five hours after it has been put on. You may also feel as though you want to open your bowels. This is normal, but please try not to empty your bowel until the following day if possible.
What are the risks of banding?
Bandaging is a safe, routine procedure that is performed at the rectal bleed clinic in the endoscopy unit without an anaesthetic. The main risk from the banding is bleeding. A small amount of bleeding, equivalent to about an egg cup full, is normal, particularly after opening your bowels. There is also a small risk of infection inside the anus, which can be treated with antibiotics. If you develop a fever, you may have an infection. You will be given further advice if you have this done.

After your treatment
Try not to open your bowels until the day after your banding, but do not worry if this is not possible. You will be able to take a bath or shower as you would normally, but please avoid strenuous exercise, such as jogging or riding a bike, for the rest of the day. You should be able to get back to normal activities the next day.

You may have a dull ache inside your anus for a short while. This is normal and you may take regular over-the-counter painkillers (such as paracetamol) if you need to. You may also have some bleeding over the next couple of days. You may even see the haemorrhoid and band in your stool when you open your bowels. This is perfectly normal. Please avoid using creams or applicators directly into the anus after your treatment.

If you experience heavy bleeding that does not stop, or if you feel unwell, feverish and have severe pain, please go to your nearest Emergency Department (A&E) and explain that you have had your haemorrhoids banded.

What follow-up care will I receive?
It is likely that you will be discharged and no further follow-up at the hospital will be needed. However, if you have several haemorrhoids, you may need the banding to be repeated. This will be performed as an outpatient in clinic and we will organise this if necessary. It is important that you attend this appointment, or let us know if you wish to rebook, t: 020 7188 2577, Monday to Friday, 9am to 5pm, and ask for an appointment for the peri-anal follow-up clinic on a Tuesday morning.

What do I need to do after I go home?
If you have any questions or concerns after the test, please phone the Endoscopy Unit.

Contact us
If you have any problems or concerns, please contact the Endoscopy Unit for advice, Monday to Friday, 9am to 5pm, t: 020 7188 7188 ext 54059 for St Thomas’ Hospital or ext 53499 for Guy’s Hospital. Outside these hours, if your concern is urgent, please contact your GP for advice.

If you need to change or cancel your appointment, please call t: 020 7188 8887.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit 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

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
  t: 020 7188 8801 (PALS)  e: pals@gstt.nhs.uk
  t: 020 7188 3514 (complaints)  e: complaints2@gstt.nhs.uk

Language and accessible support services
If you need an interpreter or information about your care in a different language or format, please get in touch.
  t: 020 7188 8815  e: languagesupport@gstt.nhs.uk

NHS 111
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.
  t: 111

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

Get involved and have your say: become a member of the Trust
Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:
  t: 0800 731 0319  e: members@gstt.nhs.uk  w: www.guysandstthomas.nhs.uk/membership