Having a CT enema scan (with faecal tagging and reduced bowel preparation)

This leaflet aims to answer your questions about having a CT enema scan. It explains the benefits, risks and alternatives, as well as what you can expect when you come to hospital. If you have any further questions, please speak to a doctor or member of staff in the CT department – contact details are at the end of this leaflet.

What is a CT enema scan?
CT stands for computerised tomography. A CT enema is a test to look at your large bowel. It involves inserting a small tube into your rectum (back passage) to inflate the large bowel with carbon dioxide. A special contrast dye that helps the large bowel show up better on x-rays, are usually used during the CT enema. A series of pictures are then taken (involving x-rays) to produce a detailed image of the inside of your body. The pictures show cross-sections (slices) of your body. They are put together by a computer and viewed on a screen. The radiologist (a doctor who uses x-rays to diagnose and treat illnesses) will review and report on these images.

The CT enema scan is also called a virtual colonoscopy. It is performed in the x-ray department by either a radiographer (a person who takes x-ray images) or radiologist.

This examination needs special preparation. It is important that you follow the preparation instructions on starting on page 2.

Why should I have a CT enema scan?
A CT enema scan can help your doctor to find the cause of your problem, and your doctor feels it is the best treatment option for you.

What are the risks?
As with x-rays, CT scans use radiation. The level of radiation used is very small and the benefits of the scan are thought to outweigh any risks.

The contrast dye that is used contains iodine, which some people are allergic to. We will check whether you have any allergies. If you have an injection of x-ray contrast dye, it may give you a metallic taste in your mouth and a ‘hot flush’. Some people may feel as if they are wetting the bed. All of these sensations are perfectly normal and pass within a couple of minutes. The iodine injection can also affect kidney function and so will not be given if you have very poor kidney function.

The carbon dioxide given to inflate the bowel is not suitable for all patients and we will use your pre-scan checklist to determine if it can be used. If it can’t, we will use air.
If you are or think you could be pregnant, or have had an allergic reaction to contrast dye or iodine in the past, you must tell your doctor. Alternatively, contact CT reception at Guy’s on 020 7188 5574 or St Thomas’ on 020 7188 5464, Monday to Friday 9am to 5pm.

Are there any alternatives?
The alternatives to the CT enema scan are a colonoscopy or sigmoidoscopy. Please speak to your doctor if you have any questions or concerns about this examination, or if you would like further information on the alternative options.

How can I prepare for the CT enema scan?

If you have diabetes
You must make sure that you have a morning appointment. If you take insulin, you should be given a 9am appointment. Please call us if this has not been done – contact details are at the end of this leaflet. If you are taking medicines for diabetes, such as metformin, this may need to be altered around the time of the procedure. Call the CT department at Guy’s on 020 7188 5574 or St Thomas’ on 020 7188 5464, Monday to Friday 9am to 5pm, for advice.

If you are of childbearing age and have regular periods
You must ensure the scan is within 10 days of the first day of your last period. Please call the department if you need to reschedule your scan, or if you think you may be pregnant.

If you have any medication allergies
Please contact the CT department on the above contact numbers to let them know of any medication allergies that you may have.

If you are taking the contraceptive pill
It may not be effective once you have taken the bowel preparation, so you must use other precautions. Please speak to your GP, pharmacist or family planning clinic for further advice on contraception.

Medicines to prepare you for the scan
Your bowel needs to be empty for the scan to make sure the examination is effective. To achieve this, you will need to change your diet and take a laxative preparation, called sodium picosulphate, on the day before the scan.

You should have been sent the following preparations with your appointment letter:

- A sachet of sodium picosulphate – the laxative which will help to empty your bowel. It will result in some diarrhoea so please ensure that on the day that you take this medication, you are at home and have easy access to a toilet. It is not advisable to take this preparation at work, due to the diarrhoea that it produces. If the sodium picosulphate is taken as per the instructions in Diet table A, the diarrhoea should have resolved by the morning of the CT enema examination. If it has not completely resolved by then and you are worried about being ‘caught out’ on the journey to the hospital, please ensure that you bring some extra toilet tissue with you, and you plan your route carefully so you will have access to a toilet if necessary.

- Two small bottles of Omnipaque™, a special liquid (dye) that is used to ‘tag’ any remaining faeces (stool) in the bowel. Most of the dye (more than 99.5%) is not absorbed by the body and gets mixed with the stool in the large bowel (this is known as ‘faecal tagging’). It will eventually be excreted (passed out of the body). The liquid shows up on the CT within your bowel, helping the doctor to read the scan. If you have a history of allergy to iodine or contrast dye, you must call the x-ray department before you take the Omnipaque™ to check whether you should take it – contact details are at the end of this leaflet.
If you have not received the sachet and/or liquid, or have any questions about these instructions, please contact the CT Department.

**The day before your scan**
Please take your regular morning medicines at least one hour before you take the sodium picosulphate, otherwise they may not be absorbed into the body. Any other medicines taken later in the day from lunchtime onwards can be taken as normal.

Only have small meals made up of foods called “low residue foods”, which will help the sodium picosulphate to work properly. These include:

- fats, such as butter and margarine – only a small amount of these should be used
- eggs, especially boiled and poached
- cereals including cornflakes and crisped rice cereal, **but not bran**
- cream, cottage cheese or cheese sauce
- potatoes without the skins – boiled, creamed, mashed or baked, but not roasted or deep fried (chips)
- plain white pasta, noodles or boiled rice
- meat or fish – for example minced, well cooked, tender, lean beef, lamb, ham, veal, pork, poultry, fish and shellfish
- gravy made from stock cubes (white flour or corn flour can be used to thicken)
- white bread or toast
- sugar or sweetener
- clear jelly.

**Do not eat vegetables, fruit, brown bread, brown rice, brown pasta, jam, nuts, biscuits or crisps, or drink alcohol.**

The table below gives an example of how you should eat these foods and drinks, during the day before the procedure, and explains when to take the sodium picosulphate and the Omnipaque™.

**Diet table**

<table>
<thead>
<tr>
<th>8am: before breakfast</th>
</tr>
</thead>
<tbody>
<tr>
<td>Take the sachet of sodium picosulphate:</td>
</tr>
<tr>
<td>• <strong>Step 1</strong>: mix the contents of the sachet in 150ml (about one cupful) of cold tap water. Do this in a large glass or jug, as the mixture may fizz over.</td>
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<tr>
<td>• <strong>Step 2</strong>: stir the solution for two to three minutes. If it becomes warm when you stir it, wait until it has cooled down before drinking the whole solution. Once the solution is ready, drink it immediately. The solution will appear cloudy.</td>
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<table>
<thead>
<tr>
<th>8am – 9am: breakfast</th>
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<tbody>
<tr>
<td>Tea or coffee (with milk, and sugar or sweetener, if needed) or other clear fluids such as water, clear soups, herbal tea, black tea or coffee, or diluted cordials or fruit juice (smooth with no fruit bits).</td>
</tr>
<tr>
<td><strong>Choose ONE of the following:</strong></td>
</tr>
<tr>
<td>• 30g crisped rice cereal or cornflakes with 100ml of milk</td>
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<tr>
<td>• two slices of white bread or toast with a small spread of butter or margarine and honey</td>
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<tr>
<td>• one boiled or poached egg and one slice of white toast or bread with a thin spread of butter or margarine</td>
</tr>
<tr>
<td>• 50g of cottage or cream cheese and one slice of white toast or bread with a thin spread of butter or margarine</td>
</tr>
</tbody>
</table>

3 of 6
Straight after breakfast, drink one bottle of Omnipaque™.

Mid morning:
Tea/coffee (with milk and sugar or sweetener, if needed)

12pm – 1pm: lunch

Choose ONE of the following:
- 75g meat or fish with gravy
- two boiled or poached eggs
- 100g cream or cottage cheese

Add ONE of the following:
- two slices of white bread or toast with a small spread of butter or margarine
- two egg-sized potatoes without skins with a small amount of butter or margarine
- two tablespoons of plain white pasta/rice

Drink plenty of clear fluids, preferably water. Tea and coffee should now only be black (no milk).

After lunch, do not have any solid food, milk or other dairy products until after the scan.

6pm – 8pm: early evening
- Drink the second bottle of Omnipaque™
- Do not have any solid food
- Clear soup or a meat extract drink and clear jelly are allowed.

After 9pm
Do not eat any more food until after the examination. Continue to drink plenty of clear fluids (for example water, squash, fizzy drinks, clear strained soup, clear stock).

Stay near a toilet once you have started taking the sodium picosulphate. You should expect frequent bowel movements and eventually diarrhoea, starting within three hours of the first dose. You may have some bloating or stomach cramps – this is normal. You can use a barrier cream, such as zinc and castor oil on your bottom, to prevent soreness.

Remember to keep drinking clear fluids throughout the day. This will stop you becoming dehydrated and will also improve the tagging of stool with Omnipaque™. As a guide, try to drink about one glass every hour. Signs that you are dehydrated include dizziness, headache and confusion.

Important: If you have an allergic reaction to the preparation such as a rash, itchiness, or redness, call the CT department or your GP.

In very rare cases a reaction can cause swelling of the face, lips, tongue or throat. If this happens, go straight to your local A&E department.

On the morning of your scan
Drink clear fluids only. You can take your usual morning medicines with a glass of water by 8am.

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

**What happens during a CT enema scan?**

When you arrive in the x-ray department we will ask you to complete a short pre-scan checklist to confirm your medical history. You will also be asked to change into a hospital gown. You may find it more comfortable to bring a dressing gown and slippers with you but this is not essential. A small needle will be put into a vein in your arm to give the contrast dye, unless you have an iodine allergy or poor kidney function.

You will meet the radiographer (who takes the x-rays) and the radiologist. They will go through the procedure with you.

The scanning machine is like a huge ring doughnut on its edge. You will need to lie on a motorised bed which moves slowly through the ring of the machine as the scan is taken. Unlike some other scanning machines, the CT scanner is not enclosed.

We will help position you on the CT bed and then give you the bowel relaxant medicine. You will then be asked to roll onto your left side so we can put a small flexible tube into your rectum. Carbon dioxide, or air, will be put into the bowel through the tube, which will allow us to see the bowel better. The carbon dioxide will be absorbed by the body and breathed out through the lungs without any harm to you.

Once your bowel is inflated, we will ask you to turn onto your back for the first scan. The contrast dye will be given during this scan (unless you have an iodine allergy or poor kidney function). You will then be asked to lie on your tummy for the final scan while the tube remains in place.

You will need to lie very still while each picture is taken. We will ask you to hold your breath for about 10 seconds at a time. This helps to prevent blurring of the images.

**How long will the scan take?**

The scan will take 20 to 30 minutes but you will be in the department for about one hour. We will try to keep to your appointment time but occasionally we have to scan patients urgently at short notice. This means that your appointment could be delayed – we will let you know if this is the case.

**Will I feel any pain?**

The tube may feel a little strange in the rectum. You should not feel any pain, but please tell the radiographer or radiologist if you do. The most difficult part is keeping still. Try to relax as much as possible. If you find it uncomfortable to lie still, please tell the radiographer or radiologist.

**What happens after the scan?**

In most cases, as soon as the scan is finished you can go home, or back to your ward if you are staying in hospital. If you have had a contrast dye injection, we may ask you to wait for 10 minutes before you leave the department to make sure there are no immediate side effects from the dye.

**When can I return to work?**

If you feel well, you may return to work on the same afternoon following your CT enema test. Alternatively you may wish to take the rest of the day off to recover from the bowel preparation, and return to work the following day.
When will I get the results?
The pictures taken during the scan are carefully studied by the radiologist, who will produce a
detailed report. The report will be sent to the doctor who referred you for the scan. They will
discuss the results, and any treatment you need, with you.

If you were referred by a consultant at Guy’s and St Thomas’, they will normally receive the
results within four working days. If you were referred by a consultant at another hospital or your
GP, you should allow two weeks from the day of your scan before making a follow-up
appointment to discuss your results.

What do I need to do after I go home?
You can eat and drink as normal, and resume your usual activities straight after the scan.

If you take metformin, it may have to be stopped for two days after the scan. We will give you
further advice about this on the day of your scan.

Please contact your GP or go to your nearest Emergency Department (A&E) if you feel unwell
or think you may have an allergic reaction to the contrast dye, such as rash, itchiness or
redness.

Contact us
If you have any questions or concerns about having a CT scan, please contact the
CT department at Guy’s on 020 7188 5574 or St Thomas’ on 020 7188 5464, Monday to
Friday 9am to 5pm.

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