

Gastroscopy Preparation and Information

Gastroscopy is a procedure used to examine the esophagus (swallowing tube), stomach and duodenum (first part of small intestines). An endoscope is a thin, flexible, telescope which is about as thick as a little finger. The endoscope is passed through the mouth into the esophagus and down towards the stomach and duodenum. The tip of the endoscope contains a light and a tiny video camera so the doctor can see inside your gut.

The endoscope also has a "side channel" down which various instruments can pass. These can be manipulated by the doctor to take a small sample (biopsy) from the inside lining of the stomach by using a thin "grabbing" instrument which is passed down the side channel.

Risks of Gastroscopy:

In the hands of an experienced endoscopist the risks are very low. They include the following:

- Bleeding
- Perforation
- Aspiration (inhalation of liquid into the lungs)
- Injury to the esophagus
- Sore throat

Gastroscopy is a very common, safe procedure. While there are certain risks associated with this procedure they are outweighed in most instances by the advantages of establishing the correct diagnosis.

Before Your Gastroscopy:

- Avoid all food for eight (8) hours before the examination. You can have water or apple juice only, up to four (4) hours before the test.
- Stop taking Aspirin (ASA) and/or Vitamin E seven days before the test.
- Stop Ticlid, Plavix, or Aggrenox three (3) days before the test
- If you take Coumadin (Warfarin), discuss this with the doctor before the test is booked for specific directions as to when to stop taking this medication.

The Day of Your Gastroscopy:

When you arrive at the clinic you will be registered and given the Patient Information Form and the Consent Form for gastroscopy. Prior to the procedure, you will meet your nurse, anesthesiologist and endoscopist to discuss the problems you're having, the procedure, and any questions regarding the consent. The test can be done without sedation but most people prefer to have sedation during the procedure. A topical anaesthetic agent will be used to numb the throat and reduce gagging. You will be drowsy but conscious during the gastroscopy. The drowsiness can last for up to a couple hours after.

If you have sedation, you must have a responsible adult to drive you home or accompany you in a taxi. We do not allow you to go home by public transport or to take a taxi on your own. You cannot operate dangerous machinery or go back to work that day. You should avoid making important decisions during this period.

During the Gastroscopy:

After speaking with your nurse, anesthesiologist, and endoscopist, you will be given a light sedative to make you more comfortable. The gastroscope is passed through the mouth. A mouth guard is used to protect your teeth. Dentures will be removed. While gastroscopy can be uncomfortable, it is not usually painful. Some people experience a desire to cough or gag when the scope is passed into the esophagus.

During the procedure small samples (biopsies) may be taken. These will be sent to the laboratory for examination by the pathologist. The testing may include looking for a bacteria known as *Helicobacter pylori* which is associated with an increased risk of ulcers.

After the Procedure:

After the procedure you will be allowed to drink and eat soft foods once the sedation and freezing have worn off. Resume your usual diet the next day. While a gastroscopy only takes about 5 minutes to perform, you will be in the recovery area for about 45 minutes while the sedation wears off. We will let you know the results of the test before you go home.

The effects of the sedation can last for the rest of the day leaving you feeling drowsy. During this time you should avoid alcohol. You may have a sore throat especially if there was a lot of gagging during the gastroscopy. This normally resolves in a day or two. You can use lozenges for this. Most people feel a bit bloated from the introduced air. If you have severe pain or any other worrying symptoms you should contact either the doctor who did the gastroscopy or your family doctor or go to the emergency department at the nearest hospital.