



UNDERSTANDING COLONOSCOPY

What is colonoscopy?

Colonoscopy is an examination of the large intestine (colon or large bowel) that is performed by a trained doctor. A slim flexible tube (colonoscope) is inserted into the anus and rectum and is advanced through the beginning of the colon (cecum) and sometimes higher into the small intestine (ileum). For the patient who has had a bowel operation with creation of an ostomy (colostomy, ileostomy) the scope can be placed directly into this opening directly into the gut. The colonoscope is used to see the lining of the gastrointestinal tract. The procedure usually takes 20-30 minutes but occasionally up to an hour.

Why is colonoscopy done?

The most common reasons to perform colonoscopy are to evaluate bleeding, changes in bowel habit or abdominal pain. Other reasons include to diagnose iron deficiency anemia, to confirm abnormal barium enema findings or, to evaluate the extent and severity of the response to treatment in patients with inflammatory bowel disease. Colonoscopy is also used for colon cancer screening and to remove polyps. Currently, it is the most accurate test for identifying polyps.

How do I prepare for colonoscopy?

Your doctor will provide specific instructions on how to prepare for the procedure. The instructions will describe how to clean the bowel to provide the doctor with the best look at the colon as well as potential medications to avoid before or after the procedure to reduce the likelihood of complications.

You will probably be asked to avoid solid food for 24 to 48 hours before the examination. A clear fluid diet is generally recommended for at least 24 hours (such as clear jello, broth, juices without pulp).

You will also be required to take a laxative to purge the bowel of any stool. There are several different preparations and the type and timing may be chosen based your medical history. It is important that you follow the instructions carefully and take all the preparations to allow for a safe and thorough examination.

Some medications (blood thinners, iron supplements) are stopped up to a week before the procedure to reduce complications or improve the view from the test. Be sure to ask your doctor about your medications well beforehand. You should arrange for an escort home as your judgment might be altered by medications given to relax you during the test. You must not drive.

COLONOSCOPY

What happens on the day of the test?

You will be asked to come to the hospital at least 30 minutes before the examination. The nurse will review your medical history and will prepare you by having you change and taking your blood pressure and pulse. An intravenous line may be started to allow your doctor to give you some medications to relax during the procedure. These medications generally include a mild sedative (diazepam) and a narcotic (such as morphine, meperidine or fentanyl).

What happens during the procedure?

A colonoscopy is generally performed with you on your left side. The colonoscope is inserted into your anus and the image of the lining of your bowel is transmitted to a television screen. Air is introduced through the scope to distend the bowel and allow the scope to be pushed forward. This may cause some bloating or gas cramps. The scope has channels that allow the introduction of equipment into the colon to enable the doctor to take a sample of the bowel, remove polyps, or stop bleeding. Sampling of the lining of the bowel is generally painless. Your heart rate, blood pressure, and oxygen level will be checked throughout the procedure.

What happens after the procedure?

After the colonoscopy you will be taken to a recovery area for a period of observation and to let the medications wear off. You will be given some instructions when you are discharged home. You can generally return to a regular diet following the procedure.

What problems could occur?

Colonoscopy is a safe procedure but rarely complications can occur and include bleeding or perforation (tear in the bowel wall) which could lead to hospitalization and surgery. Side effects from the medications may include irritation of the vein, drowsiness, or problems with breathing or blood pressure.

If you develop severe abdominal pain, fever, a firm distended abdomen, repeated vomiting, or significant bleeding (more than several tablespoons) you should seek medical attention.

What are the alternatives?

X-ray tests such as barium enema or CT scan (virtual colonoscopy) can be used but are not as accurate as colonoscopy. Colonoscopy is required to remove polyps, biopsy an abnormality or treat bleeding.

More information

For more information about protecting and enhancing your digestive health, please visit www.CDHF.ca

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Over 20 million Canadians suffer from digestive disorders every year. The Canadian Digestive Health Foundation believes this is unnecessary and unacceptable.

We reduce suffering and improve quality of life by empowering Canadians with trusted, up to date, science-based information about digestive health and disease.

As the Foundation of the Canadian Association of Gastroenterology, we work directly with leading physicians, scientists, and other health care professionals to help you understand and take control of your digestive health with confidence and optimism.

Through research and public education, we aim to:

 <p>REDUCE the incidence and prevalence of digestive disorders</p>	 <p>IMPROVE understanding of digestive health issues</p>
 <p>SUPPORT those suffering from digestive disorders</p>	 <p>ENHANCE quality of life for those living with digestive disorders</p>

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