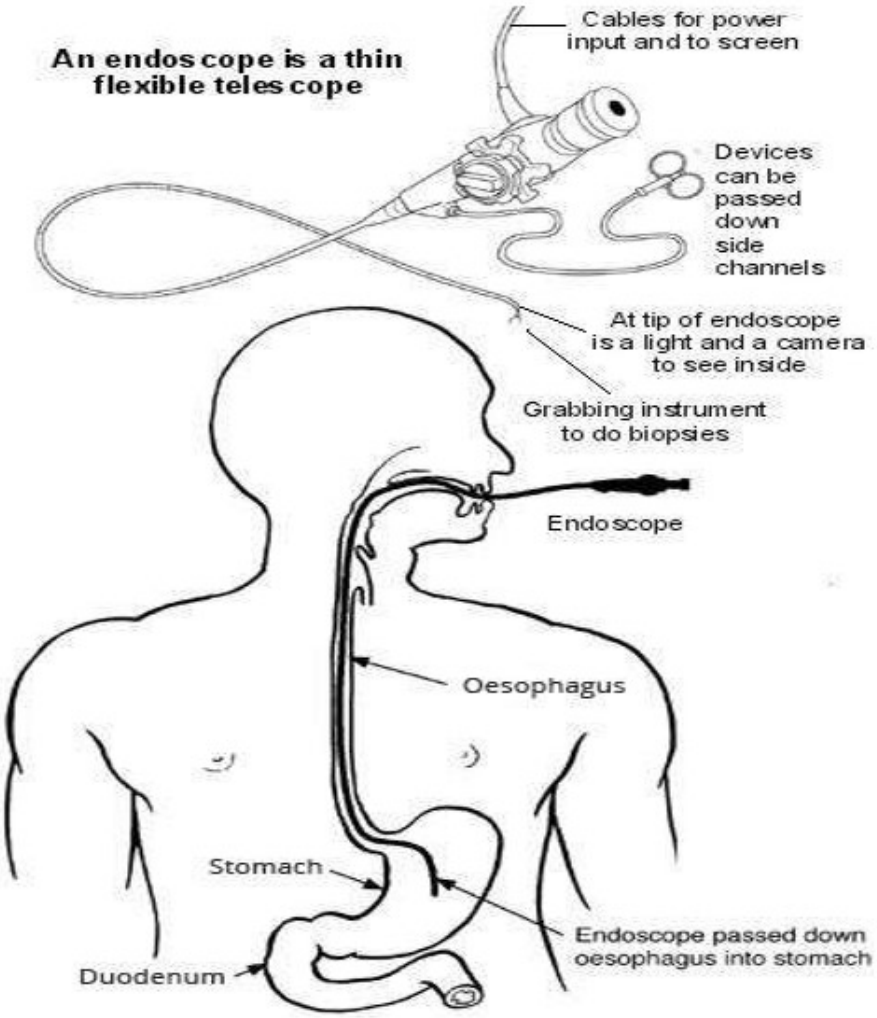
Homerton Healthcare
NHS Foundation Trust

Gastroscopy

Information for patients



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Please remember: you should not eat or drink for six hours before the test (you may have sips of water only).

This leaflet provides information about the gastroscopy procedure.

A gastroscopy is a test where a doctor or nurse looks into the upper part of your gut (the upper gastrointestinal tract). The upper gut consists of the oesophagus (gullet), stomach and duodenum. The doctor or nurse uses an endoscope to look inside your gut. Therefore, the test is sometimes called endoscopy.

An endoscope is a thin, flexible, telescope. It is about as thick as a little finger. The endoscope is passed through the mouth, into the oesophagus and down towards the stomach and duodenum.

The tip of the endoscope contains a light and a tiny video camera so the doctor or nurse 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 or nurse. For example, they may take a small sample (biopsy) from the inside lining of the stomach by using a thin 'grabbing' instrument which is passed down a side channel.

Who has a gastroscopy?

A gastroscopy may be advised if you have symptoms such as recurring indigestion, recurring heartburn, pains in the upper abdomen, repeated vomiting, difficulty swallowing, or other symptoms thought to be coming from the upper gut.

What happens during a gastroscopy?

A gastroscopy is a routine test normally done as an outpatient 'day case'. The majority of patients will just have a local anaesthetic spray to numb the back of the throat. If you are very anxious a sedative can be given by an injection into a vein in the back of your hand. The sedative can make you drowsy but it does not make you unconscious. It does help you relax but it is not a general anaesthetic.

You will be lying on your left side on a couch. A plastic mouth guard is placed between your teeth (dentures need to be removed) to protect your teeth and stop you biting the endoscope. You may be asked to take a swallow to help the first section of the endoscope go down.

The operator then gently pushes it further down your oesophagus, and into your stomach and duodenum. The video camera at the tip of the endoscope sends pictures to a screen. The doctor or nurse watches the screen for abnormalities of the oesophagus, stomach and duodenum. Air is passed down a channel in the endoscope into the stomach to make the stomach lining easier to see. This may cause you to feel 'full' and want to belch.

The doctor or nurse may take one or more biopsies of parts of the inside lining of the gut - depending on why the test is done and what they see. This is painless. The biopsy samples are sent to the lab for testing, and to look at under the microscope. Once the examination is complete, the endoscope is then gently pulled out.

The procedure usually takes about 10 minutes. However, you should allow around three to four hours in the department for the whole appointment in case there are delays which may not be in our control. This also includes the time to do the admission, consent, prepare equipment, paperwork and allow recovery time if you have a sedative.

The procedure is not normally painful but there is some discomfort mainly from air distention, which is necessary so that we can see the inside of the gut clearly.

Delays to your appointment

We also deal with emergencies which take priority over your appointment. As such, we may have to ask you to wait. We apologise in advance if this happens but please be patient with us.

Are there any side-effects or complications from having a gastroscopy?

Almost all gastroscopies are done without any problem. Without a local anaesthetic throat spray, you may have a slight sore throat after the test. This will normally settle down once you start eating and drinking.

If you had a local anaesthetic throat spray, your throat will feel numb for about an hour after the test. For your own safety you should not eat or drink for one hour to allow feeling in your throat to come back.

Occasionally you may experience a sore throat after the test. If this should happen, try a salt water gargle and it will normally settle once normal eating and drinking happens. There may also be some blood present in your spit if a tissue sample (biopsy) was taken, but this normally stops within 24 hours.

You may feel tired or sleepy for several hours if you have a sedative. There is a slightly increased risk of developing a chest infection following a gastroscopy should you inhale any secretions or stomach contents.

It is common to experience some bloating and discomfort in your stomach after the test from the air introduced to enable the doctor have a good look during the test. This enables good views of the lining to help identify anything that might be causing you problems.

Very rarely, does the endoscope cause damage to the gut. This may cause bleeding, infection, and rarely, perforation (a tear). If any of the following happen within 48 hours after a gastroscopy, consult your GP nearest emergency department.

Abdominal pain. (In particular, if it becomes slowly worse, and is different or more intense to any 'usual' indigestion pains or heartburn that you may have.)

- **Fever (raised temperature).**
- **Difficulty breathing.**
- **Vomiting blood.**

What preparation do I need to do?

- **You should not eat or drink for six hours before the test. The stomach needs to be completely empty.**
- If you have a sedative you will need somebody to accompany you home.
- Continue taking all your medication as normal with only a small sip of water on the morning of the test.
- Advice about warfarin / Clopidogrel/ anticoagulant treatment or diabetes medication should have been given to you when the test was booked.
- **If you are on a novel anticoagulation such as Apixiban or Rivaroxaban, omit this on the day of the procedure.**

What if I am diabetic?

If you are taking tablets for your diabetes, you do not require any changes in your treatment the day before the test. However, it would be advisable to take your medications in the morning rather than later in the day.

If you are taking insulin, the evening/bedtime dose may have to be reduced the day before the test. This is because your breakfast the next morning will have to be delayed until after the test. **Please contact the Homerton Diabetes Centre, Homerton Hospital on 020 8510 5920 or email huh-tr.diabetesnurses@nhs.net between 9am to 5pm several days before your test to discuss whether and how to cut back on your insulin dose**.

On the day of the test, the procedure will be carried out early in the morning whenever possible. You should not have any breakfast and you should not take your morning dose of insulin or tablets. You should restart your medications with first meal after the procedure.

What happens after the procedure?

- If you only had a throat spray, you can go home soon after the test.
- If you chose to have sedation, you will be left to rest for about an hour before you can go home, accompanied by your escort. During this time observations will be carried out. Once you are fully awake, you will be able to have something to eat and drink.
- If you have had sedation, for the following 24 hours you must not:
    - **drive or operate any machinery (including kitchen equipment)**
    - **drink alcohol**
    - **sign any important or legal documents**
    - **work in the 24hrs after the sedation has been given.**
- If you did not have sedation you will be monitored for a short period before you are discharged home. You should be able to return to work and all your usual activities 24 hours after the procedure.

You may experience a feeling of pressure, bloating or cramping during or after the procedure due to the air that was introduced. This will disappear quickly once you have passed wind.

How do I get my results?

An initial report of the test is given to you when you are discharged following your procedure. However, biopsy results can take up to four weeks to be made available and can be obtained from your GP or referring doctor. The Endoscopy Department does not give out biopsy results. If you have any questions regarding treatment or results please discuss these with your referring doctor.

How to contact us?

We aim to provide the best possible service and staff will be happy to answer any questions you may have.

For queries about your appointment, please contact the Bookings Admission Team on 020 8510 5583/7905 or huh-tr.endoscopybookings@nhs.net 9am to 5pm weekdays, excluding bank holidays.

For queries about the gastroscopy, please contact the Endoscopy advice number on 020 8510 7532 or huh-tr.endoscopybookings@nhs.net

The cost of a missed appointment is on average £400 to the NHS.

Further information

NHS website: www.nhs.uk

myEndoscopy: www.myendoscopy.co.uk

Acknowledgement

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Patient Advice and Liaison Service (PALS)
PALS can provide information and support to patients and carers and will listen to your concerns, suggestions or queries. The service is available between 9am and 4pm.

(Telephone) 020 8510 7315
(Textphone) 07584 445 400
(Email) huh-tr.pals.service@nhs.net

For information on the references used to produce this leaflet, please ring 020 8510 5302, text: 07584 445 400 or email huh-tr.patientinformation@nhs.net

If you want this information in large print, easy read, plain text, audio or braille please contact Patient Information on 020 8510 5302 or email: huh-tr.patientinformation@nhs.net This information may also be available in other languages.

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