

COLONOSCOPY

QUESTIONS & ANSWERS



GLASGOW COLORECTAL CENTRE

WWW.COLORECTALCENTRE.CO.UK

GLASGOW COLORECTAL CENTRE
Ross Hall Hospital
221 Crookston Road
Glasgow
G52 3NQ
e-mail: info@colorectalcentre.co.uk
Ph: Main hospital switchboard - 0141 810 3151
Ph. General pricing and bookings enquiries – 0808 101 0337



GLASGOW COLORECTAL CENTRE

WWW.COLORECTALCENTRE.CO.UK

Colonoscopy

What is colonoscopy?

Colonoscopy is a safe, effective method of examining the full lining of the colon and rectum, using a long, flexible, tubular instrument. It is used to diagnose colon and rectum problems and to perform biopsies and remove colon polyps. Most colonoscopies are done on an outpatient basis with minimal inconvenience and discomfort.

Who should have a colonoscopy?

Colonoscopy may be recommended to adults 50 years of age or older who are found to have tiny traces of blood in stool samples submitted as part of the Bowel Screening Program. Patients with a family history of colon or rectal cancer may also need to consider having a colonoscopy, even if they do not have any bowel symptoms. Your doctor may also recommend a colonoscopy examination if you have had a change in bowel habit or you have noticed rectal bleeding. These symptoms indicate a possible problem in the colon or rectum.

A colonoscopy may be necessary to:

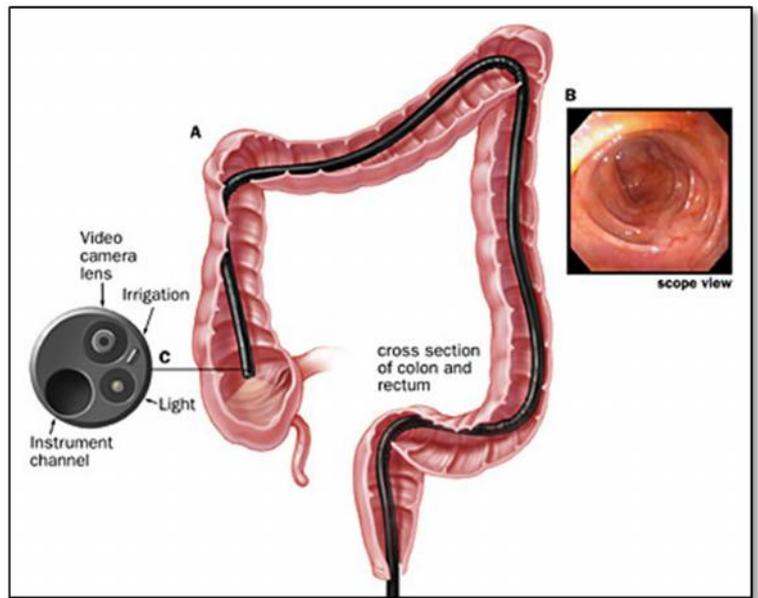
- Check unexplained abdominal symptoms
- Check inflammatory bowel disease (colitis)
- Verify findings of polyps or tumours located with a barium enema exam
- Examine patients who test positive for blood in the stool
- Monitor patients with a personal or family history of colon polyps or cancer.

How is colonoscopy performed?

The bowel must first be thoroughly cleared of all residue before a colonoscopy. This is done one day before the exam with a preparation prescribed by your physician. Many patients receive intravenous sedation, or "conscious sedation" for this procedure. This means that they may be a little drowsy but the aim is not to make them fully unconscious. The colonoscope is inserted into the rectum and is advanced to the portion of the colon where the small intestine joins the colon. During a complete examination of the bowel, your doctor may also remove polyps or take biopsies as necessary.

The entire procedure usually takes less than 30 minutes. Following the colonoscopy, there may be slight discomfort, which quickly improves with the expelling of wind. Most patients can resume their regular diet and activities the same day. If they have had sedation, they should not drive, operate machinery or sign any legal documents for the rest of the day.

Left: Flexible fiberoptic colonoscope in place examining the lining of the colon.
Right: Image of the portion of the colon being examined on the television monitor.



What are the benefits of colonoscopy?

Colonoscopy is more accurate than an x-ray or CT scan of the colon to detect polyps or early cancer. With colonoscopy, it is may also be possible to detect and remove most polyps without abdominal surgery. Removing polyps is an important step in the prevention of colon cancer.

What are the risks of colonoscopy?

Colonoscopy is generally a very safe procedure with complications occurring in less than 1% of patients. These risks include bleeding, a tear in the intestine, risks of the sedation and failure to detect a polyp.