

Having Treatment for your Swallowing Problems

Your Questions Answered

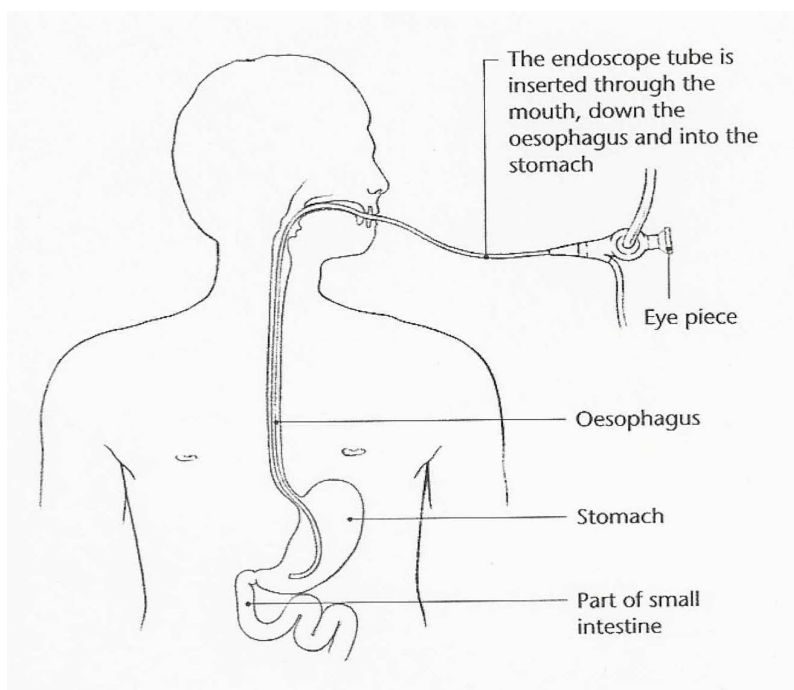
Endoscopy Unit

Surgical Services

Your doctor has recommended that you have an examination involving a gastroscopy and possible treatment for your swallowing problems. This leaflet has been produced to explain what will happen and aims to answer any questions that you may have. It has been written to enable you to make an informed decision in relation to agreeing to the test.

What is a gastroscopy?

- It is an upper gastrointestinal (GI) endoscopy or oesophago-gastro duodenoscopy (OGD).
- It is an examination of the lining of your gullet (oesophagus), stomach, and the first part of your intestine (duodenum).
- It is performed by passing a gastroscope (a flexible tube with a small camera at the end) through your mouth and into your stomach.



What might be causing my difficulty with swallowing?

- Difficulty with swallowing may be caused by a narrowing or blockage in the gullet.
- Depending on the cause of the blockage, treatment may be given during the examination to relieve it.

What are the possible treatments during the gastroscopy for my swallowing problems?

- **Oesophageal Dilatation** – the gastroscope is used to inspect and position a guide wire into your oesophagus, passing across the narrowing and onwards into your stomach. Once this guiding wire has been correctly positioned the stretching equipment is passed over the wire thereby stretching the abnormal area.

- **Oesophageal Stent** - a stent is a permanent tube made of flexible metal mesh which once in position across the narrowed area of your gullet expands to allow fluid and food to pass through to the stomach more easily.
- **Argon Plasma Coagulation** – this involves the use of a jet of argon gas that is directed through a probe which has been passed through the endoscope. It is used to destroy abnormal tissue and to seal off bleeding blood vessels.

Will the test be painful?

- There may be a minor degree of discomfort during the test but the endoscopist will give you sufficient sedation to keep you comfortable.

What are the risks of having a gastroscopy?

- A sore throat after the examination is common and should resolve after a few hours.
- There is a small risk of damage to crowned teeth or dental bridgework.
- Complications include perforation or tear of the intestine or bleeding. These complications occur in less than 1 in 2000 examinations. The risk of a perforation is increased if treatment is required to treat a blockage but still occurs in less than 3% of cases. Occasionally urgent treatment or an operation may be required.
- A reaction to the drugs used during the gastroscopy may require you to stay in hospital.
- Inhalation of gastric contents can cause pneumonia which would require antibiotic treatment.
- If biopsies are taken, bleeding may occur at the site of the biopsy, and nearly always stops on its own.

How do I prepare for the examination?

- If you require ambulance transport, please arrange this with your GP at least seven days before your appointment.
- If you are a Diabetic or taking Warfarin Aspirin or Clopidogrel tablets, please contact the Endoscopy Unit.
- If you take prescription medication take them at the normal time.
- In order to examine the stomach properly, it must be empty.
- **Do not eat anything for four hours or drink anything for two hours before your appointment time**

What will happen when I arrive for my gastroscopy?

Freeman Hospital Appointments:

Please report to the Admission Desk (Main Entrance) and then go to the Day Treatment Centre (Ward 21) Level 3.

Royal Victoria Infirmary Appointments:

Please report to Endoscopy Unit, Leazes Wing, RVI.

Please enter the RVI via Leazes Wing Entrance, walk past the reception desk, turn right and the Endoscopy Unit is situated on the left next to the Hairdressers.

In both hospitals:

- Before the procedure you will be seen by a qualified nurse and the Endoscopist and you will have the opportunity to discuss any problems or worries.
- You will be asked to sign a consent form indicating that you understand the nature and risks of the procedure. The consent form is a legal document, therefore please read it carefully.
- Please leave any valuables at home.
- The test will be carried out using a sedative injection. This sedative injection makes you sleepy, relaxed and less anxious. It is **not** a general anaesthetic and you will **not** be unconscious, but it is unlikely you will remember much about the procedure.
- Please arrange for a relative or friend to collect you directly from the ward to take you home after your test.

Alternative Tests:

There are no real alternatives to this test and treatment.

If you want further information, please discuss this with your GP or the doctor who has referred you for this test.

What will happen during the test?

- Your test will be performed by a qualified endoscopist or a trainee endoscopist under direct supervision.
- In the examination room you will be made comfortable on a trolley, resting on your left side.
- A qualified nurse will remain with you throughout the procedure.
- You will be asked to remove any dentures or glasses.
- A plastic guard will be placed in your mouth to protect your teeth and the gastroscope.
- A clip will be lightly attached to your finger to check your pulse rate and oxygen level.
- Oxygen will be administered into your nostril if necessary.
- The Endoscopist will pass the gastroscope over your tongue, down into your gullet and into your stomach. This will not interfere with your breathing and will not be painful, but may be slightly uncomfortable due to the air that the Endoscopist puts into the stomach to obtain a good view.

- Any saliva or other secretions produced during the test will be removed using a small suction tube, rather like the one used at the dentist.
- Small tissue samples (biopsies) can be taken through the gastroscope which is painless. After diagnosis these may be retained for education, research or quality assurance.
- Any treatment will be performed for which you have consented.
- A video recording and /or photographs may be taken for your records and will only be seen by those involved in your care

What will happen after the test?

- You may have a sore throat and you may feel bloated.
- You will be transferred to the recovery area, where a qualified nurse will observe you until the effects of the sedation have worn off.
- A relative or friend must collect you directly from the ward to take you home after your test. Please liaise with the ward staff to arrange collection time. You will not be fit to go home by public transport.
- Once home you should rest quietly for the remainder of the day.
- Please ensure a responsible adult remains with you until the next morning as the after effects of the injection may make you sleepy and forgetful for 24 hours after the test.

For 24 hours after the test you should not:

- **Go to work**
- **Drive a vehicle**
- **Operate machinery (including household appliances)**
- **Drink alcohol/take sleeping tablets/recreational drugs**
- **Sign any legal documents**
- **Have a bath unsupervised**
- **Be left alone to care for children**

When will I know the result of my gastroscopy?

- Sedation makes you forgetful, but the endoscopist or nurse, in the presence of your accompanying relative or friend, will discuss the results of the test with you, if you wish.
- If you have had biopsies taken you will receive the results at your out patient appointment or by letter if you require treatment.
- A full report will be sent to your doctor.
- Before you are discharged you should be given clear details concerning follow-up arrangements.

Questions or problems?

If you have any further questions you should contact:

Freeman Hospital

Endoscopy Unit between 9.00 am - 4.30 pm 0191 2231208 direct line

Day Treatment Centre (Ward 21) 0191 2231294 direct line

RVI

Endoscopy Unit between 9.00 am - 4.30 pm 0191 2825655 direct line

If you have any queries or require any further information out of these hours, please contact your GP.

Information reviewed & updated by:

L. Hodgson, Endoscopy Services Manager and Endoscopy Unit Sisters E. Woodall + G. Nicholson

July 2003, July 2005, March 2007, March 2008, May 2010.

Review Date May 2012

This information can be made available in larger print, other formats and languages on request. Please contact 0191 233 6161 extension 27740.

Arabic:

هذه المعلومات يمكن أن تتوفر بأحرف الطباعة الكبيرة وبألساق ولغات أخرى حسب الطلب. نرجو الاتصال برقم 0191 233 6161 داخلي 27740.

Bengali:

এই তথ্য অনুরোধ করলে আরো বড় মুদ্রণে, অন্য ফর্ম্যাটে এবং ভাষার পাওয়া যাবে। অনুগ্রহ করে 0191 233 6161 এক্সটেনশন 27740-তে যোগাযোগ করুন।

Chinese Simplified:

本小册子备有大字印刷、其它格式和其它语言版本可供索取。
请拨打0191 233 6161分机27740索取。

Chinese Traditional:

本小册子備有大字印刷、其它格式和其它語言版本可供索取。
請撥打0191 233 6161分機27740索取。

Czech

Tyto informace jsou k dispozici také ve velkém fontu, v jiných mediálních formátech a v dalších jazycích. Zavolejte na telefonní číslo 0191 233 6161, linka 27740.

Farsi Persian:

اگر درخواست کنید، این اطلاعات میتواند با حروف بزرگ، 'فرم دیگر و یا زبان های دیگر در دسترس شما قرارگیرد. لطفاً با شماره 0191 233 6161 - بخش داخلی 27740 - تماس بگیرید.

French:

Ces informations peuvent être proposées en gros caractères ou dans d'autres formats ou langues sur demande. Veuillez contacter le 0191 233 6161, extension 27740.

Polish:

Na życzenie niniejsze informacje mogą być udostępnione w wersji z dużym drukiem oraz w innych formatach i językach. Prosimy o kontakt pod numerem 0191 233 6161 wew. 27740.

Portuguese:

Mediante pedido, esta informação pode ser disponibilizada em letras maiores, noutros formatos e noutras línguas. Por favor ligue para o 0191 233 6161 extensão 27740.

Turkish:

Bu bilgi, talep edildiğinde, büyük puntuyla yazılı olarak, diğer format ve dillerde de sağlanabilir. Lütfen bunun için 0191 233 6161'dan dahili 27740'ı arayın.

Urdu:

یہ معلومات درخواست پر بڑے پرنٹ، دیگر فارمیٹ اور زبانوں میں مہیا کی جا سکتی ہے۔ برائے مہربانی 0191 233 6161 ایکسٹینشن 27740 پر رابطہ کریں۔