

Endoscopy department

Understanding gastroscopy

Information for patients, relatives and carers

Name:

Hospital number:

Your appointment is on:at:

at: Charing Cross / Hammersmith / St. Mary's Hospital

If you have any questions or concerns about your appointment or regular medication, please do not hesitate to contact the patient service centre on **020 3312 6010**.

This leaflet is designed to help you prepare for your gastroscopy and answer any questions you may have. **Please read this at least one week before your appointment and follow the instructions carefully.**

If you do not attend your appointment, we will refer you back to the healthcare professional who requested this investigation for you

Checklist

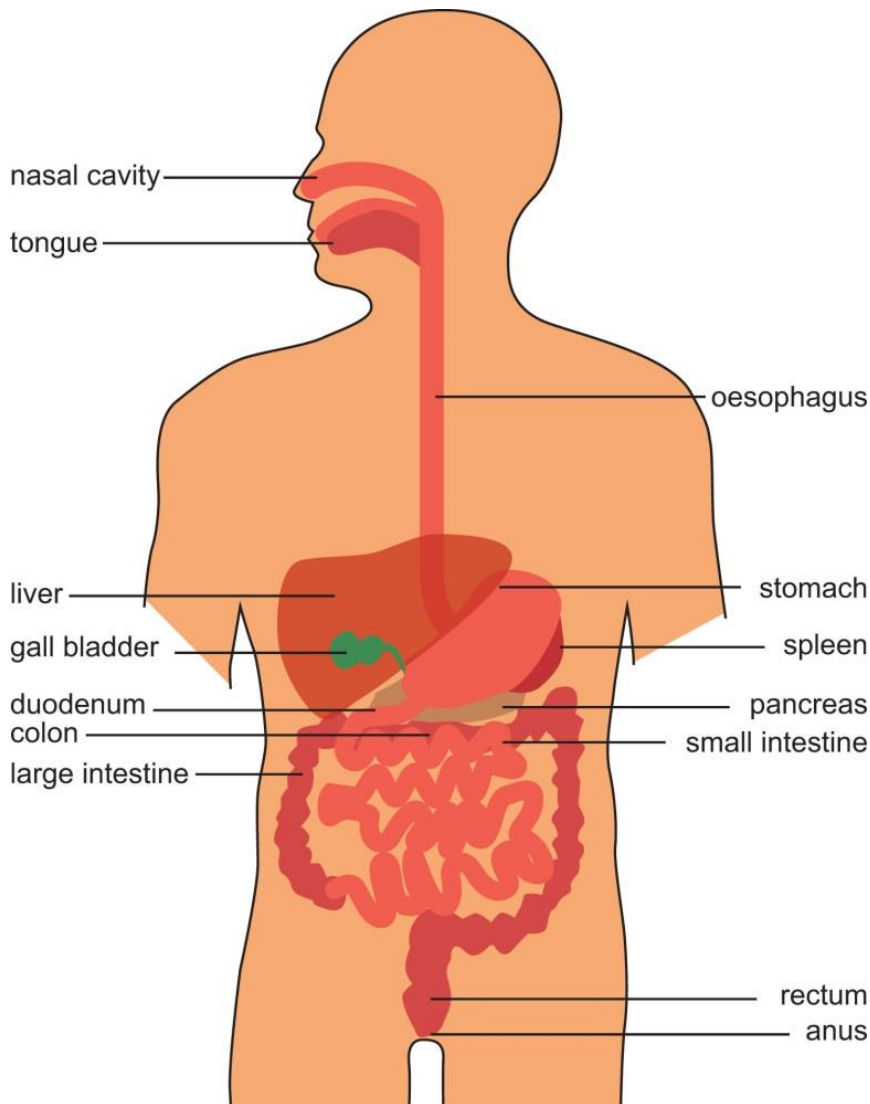
- **Do not** eat or drink anything for **6 hours** before your appointment (not even water, sweets or chewing gum).
- Arrange for a responsible adult (18 years or older) to collect you from the unit after your appointment if you are having conscious sedation (please see page 3). It is recommended that this person stays with you for 12 hours after your procedure.
- If you do not organise an escort, or if they are under 18 years old, we will not be able to do the test with conscious sedation on that day.
- If you think you are taking a drug to influence your clotting as a preventative measure or you have suffered a stroke or have heart disease, please contact us.
- If you are taking any medication to thin your blood, please contact us for advice at least **1 week** before your appointment. We need to know why you are taking this medication. If you're taking aspirin, you do not need to stop this.

Before your appointment, please read this information carefully:

What is a gastroscopy?

Gastroscopy (also known as 'OGD' and upper endoscopy) is an examination of the lining of the oesophagus (gullet), stomach and duodenum (small intestine). An endoscope (a long, flexible tube) is passed through your mouth and down the back of your throat into the oesophagus. Using the light on the end of the endoscope, the endoscopist (a doctor or nurse) can look for any abnormalities. If necessary, biopsies (small samples of tissue) may be taken during the examination and sent to the laboratory for further investigation.

A gastroscopy can also be used to treat conditions of the upper gastrointestinal tract by passing instruments through the endoscope. For example, your endoscopist might stretch a narrowed area or treat bleeding with little or no discomfort. Your endoscopist will discuss this with you in detail before the test.



A gastroscopy can also check for symptoms of persistent upper abdominal (tummy) pain, nausea (feeling sick), vomiting and difficulty in swallowing. It is also used for finding the cause of bleeding from the upper gastrointestinal tract.

Are there any alternatives to gastroscopy?

The main alternative to the test is a barium meal x-ray. During this procedure, you drink a special liquid (barium) which allows images (pictures) of your stomach to be seen using X-rays. It is less accurate than gastroscopy at detecting inflammation, ulcers and tumours of the oesophagus, stomach and duodenum. Unlike endoscopy, you cannot take biopsies during a barium meal X-ray.

Please note: A 'capsule endoscopy' (where a pill-sized video capsule is swallowed) is not an alternative to a gastroscopy, as it does not give enough pictures of either the oesophagus or the stomach, and biopsies cannot be taken.

Are there any risks associated with gastroscopy?

Complications are rare. There is a 0.2 per cent risk of the following happening after a gastroscopy:

- bleeding
- reaction to the sedatives, if used during the test
- perforation (tearing) of the lining of the gastrointestinal tract, which may require surgery to repair
- aspiration pneumonia – inflammation of the lungs, caused by inhaling the contents of the stomach. This is why it is important that you follow the instructions about not eating or drinking before the test
- disturbance of crowned teeth or dental bridgework. It is important that you tell us of any crowns or bridgework before we start the test

The risk of complications may increase if you have any pre-existing heart or lung conditions. Your doctor will discuss any increased risks with you before you have the test.

Local anaesthetic spray or conscious sedation?

For the procedure, you can choose to have either a local anaesthetic spray to numb your throat or conscious sedation, where a mild sedative is given intravenously (through a cannula – a thin tube – into your hand) to help reduce any discomfort. It is different from a general anaesthetic as it does not put you to sleep, so you are able to respond to your doctor or nurse. Conscious sedation may make you forget parts of the test. Each patient will react differently and will experience different levels of drowsiness.

If you choose to have local anaesthetic spray, it is sprayed onto the back of your throat to make it numb and reduce some of the sensation of gagging and retching. It wears off after 30 minutes and then you can eat and drink again.

The advantages of having the throat spray are that:

- you can go home immediately after the test
- you do not need a relative or friend to take you home
- you will be able to drive yourself home after the test
- you can return to work after the test

It is not unusual to experience some symptoms of bloating or wind pain despite the sedative and painkiller.

If you have conscious sedation, you cannot go home by yourself – a friend or relative must escort you home. It is recommended that someone stays with you for 12 hours after your procedure. Please make sure that you have access to a telephone when you return home. If you have not been able to make these arrangements, please speak to the nursing staff. We cannot do the test on this day with conscious sedation if you do not have an escort.

Two weeks before your appointment

If this is your **first gastroscopy** to investigate a new symptom and you are taking antacids stop taking these. **(Unless otherwise instructed by your referring team)**

If this is a **repeat test** to check healing of an ulcer / inflammation or monitor / treat a known problem, then **you should continue** taking antacids until the day before your procedure.

Examples of antacids are:

- **Axid** (Nizatidine)
- **Losec** (Omeprazole)
- **Nexium** (Esomeprazole)
- **Pariet** (Rabeprazole)
- **Pepcid** (Famotidine)
- **Protium** (Pantoprazole)
- **Tagamet** (Cimetidine)
- **Zantac** (Ranitidine)
- **Zoton** (Lansoprazole)

If you have **diabetes**, you should contact your GP or your diabetes nurse specialist for advice before your appointment. Alternatively, you can contact us using the telephone number on the front page of this leaflet for further advice.

One week before your appointment

If you are taking any medication to thin your blood, please contact us for advice at least one week before your appointment. We need to know why you are taking this medication. If you're taking aspirin, you do not need to stop this.

If you are taking any GLP-1 agonists (Semaglutide) which are used in the management of diabetes and weight loss, please stop these 1 week prior to your test

What you should do to prepare for your appointment

- You **must not** have anything to eat or drink for at least six hours before your appointment
- If you are taking any GLP-1 agonists (Semaglutide) which are used in the management of diabetes and weight loss, please take **ONLY a LIQUID DIET** the day before your procedure

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- If you choose to have conscious sedation, you will not be able to go home by yourself afterwards – a friend or relative who is 18 years of age or older must escort you
 - You will need to organise your own transport home by car with someone else driving, as ideally you should not travel home on public transport. You will also need to arrange for someone to stay with you overnight

What happens on the day of the test?

An empty stomach allows for the best and safest examination, so please do not have anything to eat or drink (not even water, sweets or chewing gum) for at least 6 hours before your appointment.

If you regularly take medicines in the morning, you should take them before 07.00 on the day of the test, with a small sip of water, if necessary, unless you have been advised otherwise.

The gastroscopy will be done as close to your appointment time as possible. Every effort is made to keep waiting times to a minimum, but it is not possible to say how long individual procedures will take. You may wish to bring something to read with you.

We advise you to wear loose-fitting clothes to your appointment, as during the procedure, the endoscopist will introduce air into your stomach (see below), which may cause bloating afterwards. The bloating will go down, but wearing tight-fitting or tailored clothes will make you more uncomfortable.

Your endoscopist will discuss the procedure, any treatment, possible risks, expectations and side effects with you before asking for your written consent. This written consent must not feel rushed and will be obtained in a pre-assessment room before your procedure.

We will not ask you to change into a gown but you will be asked to remove any dentures and glasses in the examination room. We will then ask you to lie on your left side on a trolley for the procedure to take place.

- If you chose to have the local anesthetic throat spray, this will be sprayed onto your throat. We will place a small probe on your finger to monitor your pulse and blood oxygen level.
- If you chose to have conscious sedation, we will insert an intravenous cannula into the back of your hand or arm. We will give you oxygen through your nose. We will place a small probe on your finger to monitor your pulse and blood oxygen level.

We will give you a mouth guard to protect your teeth. The endoscopist will then place the endoscope (a long, flexible tube) into your mouth, down your throat and into the oesophagus. They will introduce air into your stomach, which will help them to see inside. If any saliva collects in your mouth, the nurse will clear it with a small suction tube similar to that used by dentists.

The endoscope **will not** interfere with your breathing or cause you any pain. The sensation of gagging and retching may still be felt as with anything touching the back of the throat whether you have local anesthetic spray or conscious sedation.

Air introduced into the stomach may cause you to feel bloated or burp or pass wind during the procedure. This is normal so please do not be embarrassed by it.

Endoscopy can take up to a **maximum** of 15 minutes to complete.

Please note: Imperial College Healthcare NHS Trust supports the training of medical, surgical and respiratory registrars as well as nurse endoscopists. Your consent or procedure may be undertaken by any of these trainees who are supported and supervised by qualified trainers within the endoscopy department.

What happens after the test?

If you chose to have the throat spray, you will be able to go home almost immediately afterwards. You should not have anything to eat or drink for half an hour after the test, as your throat may still be numb from the anesthetic.

If you chose to have conscious sedation, you will be left to rest for about one hour before you can go home. You must be accompanied home by a relative or friend who is 18 years of age or older. They must come to the unit to collect you. Be aware that the effects of the conscious sedation can last up to 24 hours so you should not drive, operate machinery, sign legal documents or drink alcohol during this time.

It is recommended that someone stays with you during this period. Once you are fully awake, you will be able to have something to eat and drink.

When you will get the results

We will give you a copy of the gastroscopy report and discuss the findings with you before you are discharged. It can take up to one week for biopsy results to be available and these will be sent to your referring doctor. Details of the results and any necessary treatment should be discussed with whoever referred you for the test (either your GP or hospital doctor) at your next appointment. The endoscopy department will **not** be able to give you any biopsy results.

Symptoms to watch out for at home?

Please do not worry if you have a sore throat for the rest of the day. It is normal to experience bloating and mild abdominal (tummy) discomfort for a few days after having a gastroscopy.

However, if you experience any severe pain or persistent bleeding after your tests (on the same day), please contact the endoscopy department at the site where you had your procedure within working hours (09.00 – 17.00) and ask to speak to the nurse in charge:

- Charing Cross Hospital: 0203 311 1941
- Hammersmith Hospital: 020 3313 2645
- St Mary's Hospital: 020 3312 6681

Outside of working hours, please phone the hospital switchboard and ask to speak to the 'gastroenterology registrar on call' for further advice:

- Charing Cross Hospital: 020 3311 1234
- Hammersmith Hospital: 020 3313 1000
- St Mary's Hospital: 020 3312 6666

Alternatively, you can call your GP or NHS 111.

When you can get back to your normal routine

If you have had conscious sedation for the rest of the day you must not:

- drive or operate machinery (including kitchen equipment)
- drink alcohol
- sign any important or legal documents

You should be able to return to work and all your usual activities the day after your appointment.

How to get to the hospital

You are advised to travel, if possible, by public transport. Car parking is severely limited and you may find it very difficult to find a place to park near the hospital.

The nearest tube stations for **Charing Cross Hospital** are:

- Hammersmith – District, Piccadilly, and Hammersmith & City lines)
- Barons Court – District and Piccadilly lines).

Buses that stop outside the hospital are numbers: 190, 211, 220 and 295.

The nearest tube stations for **Hammersmith Hospital** are:

- East Acton – Central Line
- White City – Central Line

Buses that stop outside the hospital are numbers: 7, 70, 72, 272 and 283.

The nearest tube stations to **St Mary's Hospital** are:

- Paddington – Bakerloo, Circle, District, and Hammersmith & City lines
- Edgware Road – Bakerloo, Circle, and District lines

Buses that stop near the hospital on Praed Street are numbers: 7, 15, 23, 36 and 436.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3312 7777**. You can also email PALS at **imperial.pals@nhs.net** The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf. Alternatively, you may wish to complain by contacting our complaints department:

Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street.
London W2 1NY

Email: **ICHC-tr.Complaints@nhs.net**

Telephone: **020 3312 1337 / 1349**

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team:
imperial.patient.information@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

Endoscopy department
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