

GASTROSCOPY (UPPER ENDOSCOPY)

Information

WHAT IS A GASTROSCOPY (UPPER ENDOSCOPY)?

Gastroscopy (or upper endoscopy) allows visual examination of the lining of your upper gastrointestinal tract, including your oesophagus, stomach and duodenum.

An endoscope is a thin, flexible tube with a video camera and light at its end. Using the controls on the instrument, the endoscope is guided by your specialist, so as to carefully examine the lining of your upper gastrointestinal tract.

Depending on the findings and the indication for the procedure, biopsies (small tissue samples) may be taken and in some instances therapy can be delivered.

WHAT IS THE REASON FOR HAVING A GASTROSCOPY?

Gastroscopy can be performed for a variety of reasons, both to diagnose, evaluate, and treat conditions of the upper gastrointestinal tract. Common reasons for undergoing gastroscopy include evaluation of heartburn, abdominal pain, gastrointestinal bleeding, and swallowing difficulties.

WHAT ARE THE RISKS OF GASTROSCOPY?

Gastroscopy is a generally safe procedure that is commonly performed and complications are rare. Your doctor will discuss the risks and benefits with you and answer any question or concerns that you may have.

COMMON SIDE-EFFECTS

Temporary side-effects following gastroscopy include a sense of abdominal bloating related to the use of air to inflate your bowel.

You may also feel nauseated or sleepy due to the effects of the anaesthetic

medications. You may also experience a sore throat, which relates to the passage of the endoscope.

COMPLICATIONS

Perforation - Perforation is a hole or tear in the bowel wall, which may require an operation.

Bleeding - Most bleeding is minor and requires no treatment but very rarely bleeding will require a repeat endoscopy, blood transfusion, hospitalisation, or surgery.

Aspiration - If your stomach is not empty, it is possible that you can vomit and aspirate the contents into your lungs. This can require hospitalisation if severe.

Oral or dental injury - A protective mouth guard is used to reduce this risk.

Failed procedure - Occasionally gastroscopy may be unsuccessful and needs to be repeated.

Infection - The endoscope is a reusable instrument that is stringently disinfected, however there is a very small risk of infection being introduced during the procedure.

Death - Death is extremely rare, although is a remote possibility with any interventional procedure.

WHAT WILL I NEED TO DO BEFORE MY PROCEDURE?

We will need to ensure that your stomach is empty and that good views are obtained. Therefore:

- No food or non-clear fluids (ie, milk) for 6 hours prior to your admission time.
- You may have clear fluids (ie, water, cordial, black tea, black coffee, clear apple juice) up until 2 hours prior to your admission time.
- You will need to fast (ie, nothing to eat or drink) for 2 hours prior to your admission time.

WHAT DO I DO WITH MY USUAL MEDICATIONS PRIOR TO THE PROCEDURE?

Please inform your specialist if you are taking blood thinning or diabetic medications. You will be given specific instructions on the use of these medications prior to your procedure.

Your other regular medications should be continued unless your specialist provides you with specific instructions otherwise. Medications required on the morning of the procedure can be taken with a sip of water.

WHAT HAPPENS ON THE DAY OF THE PROCEDURE?

- You will be given an appointment time to come into hospital.
- Prior to your procedure you will be seen by both nursing staff and your anaesthetic doctor, who will ask for further information regarding your past medical history, medications and any allergies that you may have.
- You will be asked to sign a consent form for the procedure if you have not already done so.
- You will also have a chance to see your Gastroenterologist prior to the procedure to discuss any questions that may have arisen.

WHAT HAPPENS DURING THE PROCEDURE?

We will make every effort to ensure that you are as comfortable as possible during your procedure:

- You will be asked to change into a hospital gown and then brought into the procedure room for your upper endoscopy.



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WHAT HAPPENS DURING THE PROCEDURE? cont.

- You will be given a small drink to clear any bubbles from your stomach. A small drip needle will be inserted by your anesthetist, through which sedation will be given to make you comfortable during the test.
- Your vitals signs (oxygen levels, blood pressure, and pulse) will be closely monitored whilst you are undergoing the procedure.
- Your specialist will examine your upper gastrointestinal tract, and if necessary perform biopsies or other interventions.
- You will also need a responsible adult to stay in your home with you the night after the procedure.
- If you experience any abdominal pain, chest pain or concerning symptoms after your procedure then you should seek medical attention immediately.

HOW LONG DOES A GASTROSCOPY TAKE?

An upper endoscopy usually takes 10-15 minutes.

WHAT HAPPENS AFTER THE PROCEDURE?

- You will be taken to the recovery area, where you will be closely observed by nursing staff as you recover from your anaesthetic.
- Once awake, you will be given something to eat and drink.
- Your specialist will speak with you to inform you of your results and of the need for a follow-up test or appointment.

GOING HOME AFTER MY GASTROSCOPY?

- You will be ready to go home from hospital around 2 hours after your procedure.
- Due to the sedative medications given, you must not drive a car, operate heavy machinery or sign any important documents for 24 hours after the procedure. Therefore, please arrange for someone to pick you up in order for you to go home.

FURTHER INFORMATION ABOUT GASTROSCOPY (UPPER ENDOSCOPY)?

Further information on gastroscopy (upper endoscopy) can be found through the **Gastroenterological Society of Australia** website:

<http://www.gesa.org.au/resources/patients/health-information-fact-sheets/>