

San Francisco Gastroenterology
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Understanding Colonoscopy

Your physician has determined that colonoscopy is necessary for either colorectal cancer screening or for the further evaluation or treatment of your condition. This handout has been prepared to help you understand the procedure. It includes answers to questions that patients ask frequently. Please read it carefully. If you have additional questions, please feel free to discuss them with the endoscopy nurse or your physician before the examination begins.

What is colonoscopy?

Colonoscopy is a procedure that enables your physician to examine the lining of the colon (large bowel or intestine) for abnormalities by inserting a flexible tube with a camera on the end. The colonoscope is about the thickness of your little finger and it is inserted into the anus and advanced slowly into the rectum and colon.

What preparation is required?

The colon must be completely clean for the colonoscopy to be accurate and complete. Our staff will give you detailed instructions regarding the dietary restrictions to be followed and the cleansing routine to be used. The preparation consists of drinking a special cleansing solution. The cleansing solution is administered in a “split prep” approach whereby one-half of the solution is consumed on the afternoon prior to your colonoscopy and the other one-half is consumed several hours prior to your colonoscopy. You will also need to restrict your diet to clear liquids for 24-hours prior to the colonoscopy. Follow the instructions carefully. If you do not, the colonoscopy may have to be cancelled and repeated later.

What about my current medications?

Most medications may be continued as usual, but some medications can interfere with the preparation or the examination. It is therefore best to inform your physician of your current medications as well as any allergies to medications at least several days prior to the colonoscopy. Anticoagulants (blood thinners) and insulin (for diabetes) are examples of medications whose use should be discussed with your physician prior to the colonoscopy.

What can be expected during colonoscopy?

Colonoscopy is usually well tolerated and rarely causes much pain. Your physician will give you a medication through a vein to help you relax and better tolerate any discomfort from the procedure. Most patients do not recall the colonoscopy due to the medication

that is administered. You will be lying on your side or on your back while the colonoscope is advanced through the large intestine. As the colonoscope is withdrawn, the lining is again carefully examined. The procedure usually takes 15 to 30 minutes.

What if the colonoscopy shows something abnormal?

If your physician thinks an area of the colon needs to be evaluated in greater detail, a forceps instrument is passed through the colonoscope to obtain a biopsy (sample of the colon lining). The biopsy specimen is submitted to the pathology laboratory for analysis. If the colonoscopy is being performed to identify sites of bleeding, the areas of bleeding may be controlled through the colonoscope using special devices. If polyps are found, they are generally removed. None of these additional procedures typically produces pain. Remember, the biopsies are taken for many reasons and do not necessarily mean that cancer is suspected.

What are polyps and why are they removed?

Polyps are abnormal growths from the lining of the colon which vary in size from a tiny dot to several inches. The majority of polyps are benign (non-cancerous) but physicians cannot always tell a benign from a malignant (cancerous) polyp by its outer appearance alone. For this reason, polyps that are removed are sent to the pathology laboratory for analysis. Removal of colon polyps is an important means of preventing colorectal cancer.

How are polyps removed?

Tiny polyps may be removed with a biopsy forceps, but larger polyps are removed by a technique called snare polypectomy. The physician passes a wire loop (snare) through the colonoscope and severs the attachment of the polyp from the intestinal wall by means of an electrical current. You should not feel any pain during the polypectomy. There is a very small risk that removing a polyp will cause bleeding or result in a burn to the wall of the colon.

What happens after the colonoscopy?

After the colonoscopy, your physician will explain the results to you. You will also receive a handout that lists the results and follow-up instructions; please read this carefully. Because you will receive sedation for the colonoscopy, someone must accompany you home from the procedure. Even if you feel alert after the colonoscopy, your judgment and reflexes may be impaired by the sedation for the rest of the day, making it unsafe for you to drive or operate any machinery. You may have some cramping or bloating because of the air introduced into the colon during the colonoscopy; this should disappear quickly with passage of flatus (gas). Generally, you should be able to eat after the colonoscopy. You should be able to resume your normal duties and functions the day after the colonoscopy.

What are the possible complications of colonoscopy?

Colonoscopy and polypectomy are generally safe when performed by physicians who have been specially trained and are experienced in these endoscopic procedures. One possible complication is a perforation or tear through the bowel wall that could require emergent surgery. Bleeding may occur from the site of a biopsy or polypectomy. The bleeding is usually minor and stops on its own or can be controlled through the colonoscope using special devices. Very rarely, blood transfusions or surgery may be required. Other potential risks include a reaction to the sedative medications used and complications from heart or lung disease. Localized irritation of the vein where medications were injected may rarely cause a tender lump, but this will go away eventually. Applying hot packs or hot moist towels may help relieve the discomfort.

Although complications after colonoscopy are uncommon, it is important for you to recognize early signs of any possible complication. Contact your physician if you notice any of the following symptoms: severe abdominal pain, fever and chills, or rectal bleeding of more than one-half cup. Bleeding can occur up to 14 days after polypectomy.

To the patient

Because education is an important part of comprehensive medical care, you have been provided with this information to prepare you for the colonoscopy. If you have questions about your need for colonoscopy, alternative tests, the cost of the colonoscopy, methods of billing, or insurance coverage, do not hesitate to speak with your physician or our staff. Our physicians are highly trained gastroenterologists and they welcome your questions regarding credentials and training. If you have questions that have not been answered, please discuss them with the endoscopy nurse or your physician before the colonoscopy begins.