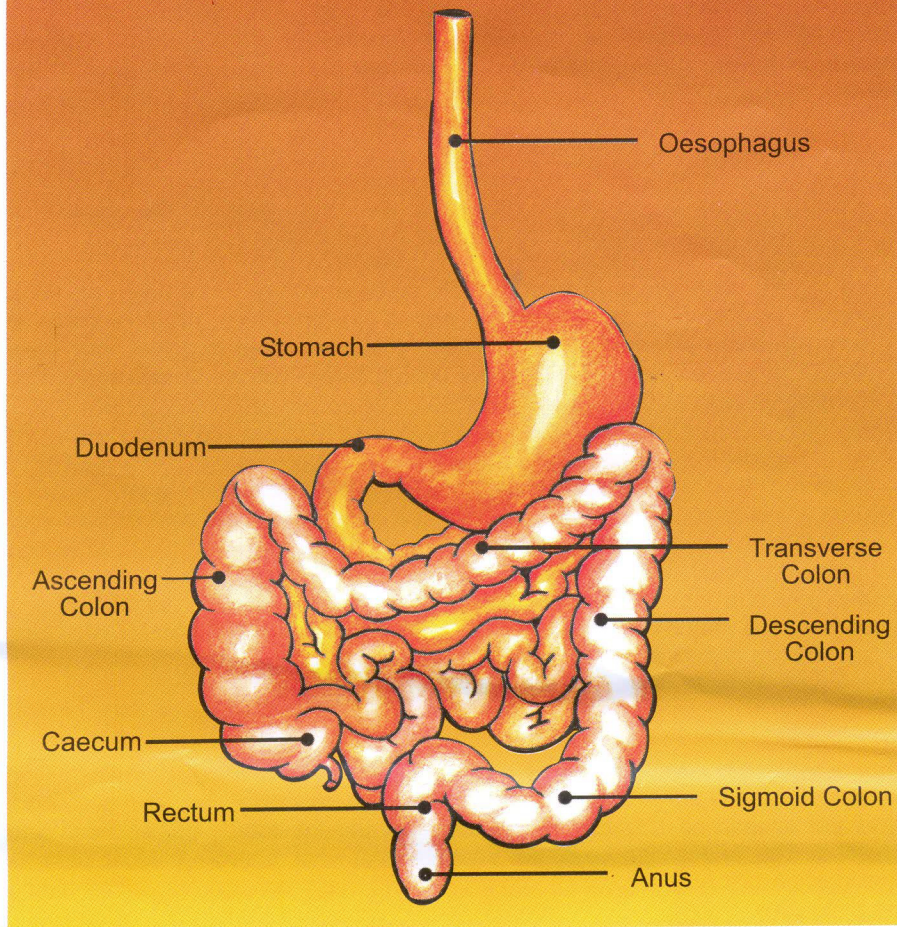


# What is Endoscopy?

## Patient Information



**Gastrointestinal Tract**



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### What is Gastroscopy?

Gastroscopy is the direct inspection of the oesophagus, stomach and duodenum (upper gastrointestinal tract) via a gastroscop - a long, flexible tube about 9 mm in diameter which displays an image on a TV screen. Small tissue samples (biopsies) may be painlessly collected in conjunction with gastroscopy by passing long, thin forceps down a channel in the gastroscop. The procedure is commonly performed when your doctor suspects inflammation, ulceration or other abnormality of these areas. Gastroscopy is also performed for dilatation of strictures (narrowing), removal of foreign bodies and placement of tube for feeding.

Video Gastroscop



### What Preparation is Necessary?

- Nothing should be taken by mouth for six hours prior to the procedure;
- Inform your doctors in case of any valvular heart disease;
- Blood test including prothrombin time and platelet count;
- All regular medications (except diabetic medication) are to be taken as usual with a small amount of water on the day of the procedure. Tell your doctor in advance about any medication you take; you might need to adjust your usual dose for the examination. Discuss any allergy to medications as well as medical conditions, such as heart or lung disease.

### On The Day of Gastroscopy

You will come at the reception counter of the endoscopy suite and deposit your medical record card to the unit receptionist. He/she will guide you to the nurse who will take your blood pressure and pulse, will ask a few questions for your clinical assessment and insert a small IV cannula to administer medication during the procedure. You may be asked to wait for a while in the waiting area for your turn, before you are taken into the procedure room.

### What Can You Expect During Gastroscopy?

Your doctor might start by spraying your throat with a local anaesthetic or by giving you a sedative to help you relax. You will then lie on your side, and your doctor will pass the endoscope through your mouth and into the food pipe, stomach and intestine. The endoscope does not interfere with your breathing. Most patients consider the test only slightly uncomfortable and many patients fall asleep during the procedure.

### What Happens After Gastroscopy?

You will be monitored until most of the effects of the medication have worn off. Your throat might be a little sore, and you might feel bloated because of the air

### Preparation

Two days before the procedure, you will only take clear liquids (see-through liquids like glucose, Rooh Afza, tea without milk and packed juices without pulp, such as Frooto). You might be asked to take medicine to clean your bowel. Alternatively, your doctor may prescribe some medications to prepare your bowel much quickly for examination. On the day of colonoscopy, you will be given enemas upon reaching the endoscopy suite.

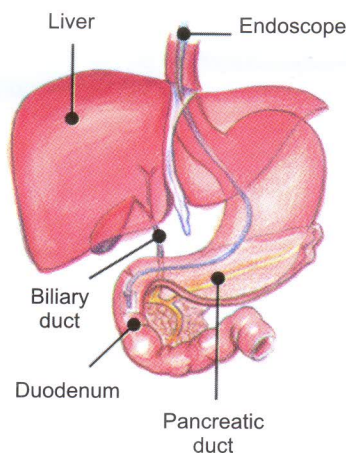
### What Happens During Colonoscopy?

Flexible sigmoidoscopy is usually well-tolerated. You might experience a feeling of pressure, bloating or cramping during the procedure. You will lie on your side while your doctor advances the colonoscope through the rectum and colon. As your doctor withdraws the instrument, he/she will carefully examine the lining of the intestine.

### ERCP (Endoscopic Retrograde Cholangiopancreatography)

This is the special endoscopic examination of the ducts (tubes) draining bile from the gallbladder and pancreatic ducts, using special side viewing endoscope under deep sleep. This procedure is performed under fluoroscopic (X-ray) control. Your doctor may have advised you ERCP for any stone removal from the bile ducts or any other cause of suspected obstruction of the ducts or pancreatic disease.

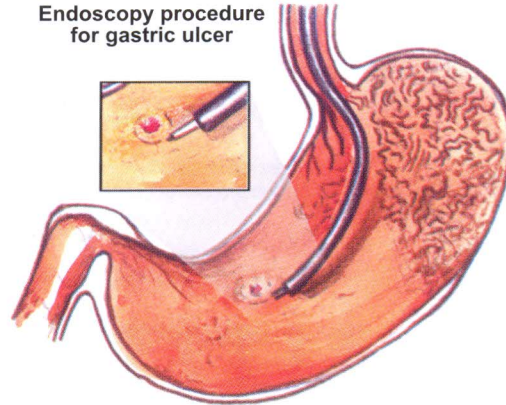
For this procedure, you need 1-2 days admission and our anaesthetist will evaluate you before the procedure for the suitability of deep sleep (monitored anesthesia care or MAC), which would be given during the procedure. You will need six hours of fasting. All regular medications (except diabetic medication) are to be taken as usual with a small amount of water on the day of procedure. Tell your doctor and anaesthetist in advance about any medication you take; you might need to adjust your usual dose for the examination. Discuss any allergy to medications as well as medical conditions, such as heart or lung disease.



introduced into your stomach during the test. You will be able to eat after you leave, unless your doctor instructs otherwise.

Your doctor can generally tell you your test results on the day of the procedure. However, the results of some tests might take several days. The nurse will brief you about any medication that your doctor prescribes after the endoscopy and you will be given a follow-up appointment of clinic, if necessary.

Endoscopy procedure for gastric ulcer



You should arrange for someone to accompany you home because the sedatives might affect your judgment and reflexes for the rest of the day. If you receive sedatives, you will not be allowed to drive after the procedure, even though you might not feel tired.

### Endoscopic Ultrasound

This procedure is similar to Gastroscopy but also includes an ultrasound of the stomach, intestine, gall bladder and pancreas from inside the lumen. Preparation for the procedure is same as that for Gastroscopy.

### pH Monitoring for Reflux

In this test, a thin bore tube is passed through the nose up to the lower end of the food pipe. The other end is connected to a pager-like device which has some buttons. This device records changes in acid concentration in the food pipe. This apparatus will remain with you for 24 hours. You are allowed to eat, drink and engage in all routine physical activities, but asked to keep a record of all your meals and activities and any symptoms that you may have during these 24 hours. Next day, the pager and tube are removed and the recorded data is analysed. The results help us in understanding your reflux disease and modifying your treatment.



### Manometry

This test helps us in understanding the movement of the food pipe (oesophagus). A small bore tube is passed through the nose and you are asked to lie down on a couch. You will be given 5-10 ml of water to drink several times during the procedure. This test takes about one hour and does not require any sedation or insertion of cannula. The data collected is recorded and analysed later.

### Flexible Sigmoidoscopy

Flexible sigmoidoscopy lets your doctor examine the lining of the rectum and a portion of the colon (large intestine) by inserting a flexible tube about the thickness of your finger into the anus and slowly advancing it into the rectum and lower part of the colon.

### Preparation

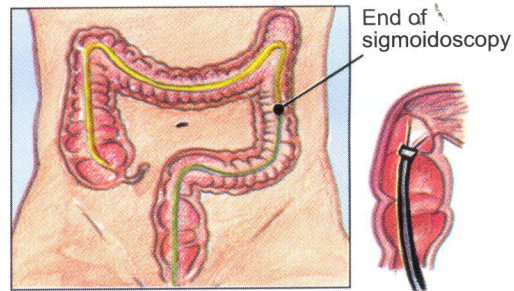
The rectum and lower colon must be completely empty for the procedure to be accurate. In general, preparation consists of one or two enemas prior to the procedure but could include laxatives or dietary modifications as well. However, in some circumstances, your doctor might advise you to forgo any special preparation.

### What Happens During Flexible Sigmoidoscopy?

Flexible sigmoidoscopy is usually well-tolerated. You might experience a feeling of pressure, bloating or cramping during the procedure. You will lie on your side while your doctor advances the sigmoidoscope through the rectum and colon. As your doctor withdraws the instrument, he/she will carefully examine the lining of the intestine.

### Colonoscopy

Colonoscopy is the endoscopic examination of the lining of the large bowel. Your doctor will insert a flexible tube about the thickness of your finger (the colonoscope) into the anus, slowly advancing it into the rectum till the extent of the colon.



Colonoscopy examines the entire length of the colon; sigmoidoscopy examines only the lower third



### Other Diagnostic Facilities at Endoscopy Suite

This unit is also being utilised as a day care for therapeutic abdominal paracentesis (taking out abnormal collection of abdominal fluid usually in patients with liver disease and other conditions).

Ultrasound-guided liver biopsy and then 4-6 hour post liver biopsy observation and monitoring are available at the recovery area of the unit.

The endoscopy suite also provides 24-hour ambulatory pH monitoring for the diagnosis of excessive acid reflux causing heartburn (GERD).

State-of-the-art 16-channel oesophageal manometry service for the diagnosis of oesophageal motility disorders is also housed in the unit.

### Endoscopy Suite

Gastrointestinal endoscopy Suite is situated at the second floor, adjacent to D2 Day care ward. It has a reception area, two rooms for endoscopic procedures, pH monitoring and oesophageal manometry room, physician reporting room, endoscope washing and disinfection area, nursing assessment area, recovery area, equipment and scope storage area, enema room and waiting area.

The endoscopy suite is equipped with state-of-the-art diagnostic and therapeutic endoscopy facilities as well as Pakistan's first endoscopic ultrasound. For elective endoscopic procedures, it is functional from 8 AM to 6 PM from Monday through Saturday, but is operational round-the-clock including Sundays and holidays for emergency endoscopic diagnostic and therapeutic interventions.

For further information about "Endoscopy," please contact:

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