

Gastroscopy

Introduction

The COVID pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you can support yourself while waiting to attend the hospital.

The procedure you will be having is called an oesophago-gastro-duodenoscopy (OGD), sometimes known more simply as a gastroscopy or endoscopy. It is an examination of your oesophagus (gullet), stomach and the first part of your duodenum (small bowel). Gastroscopy is the best method of looking at the lining of your upper digestive tract, and to establish whether there is any disease present. A long flexible tube, called a colonoscope is used in this procedure. The scope has a light and a camera at one end which shares images of the lining of your bowel onto screen which enables the endoscopist to have a clear view and to check whether or not disease or inflammation is present.

Your gastroscopy will be done by or under the supervision of a trained doctor or nurse endoscopist and we will make the investigation as comfortable as possible for you. You can choose to have the procedure done either with a local anaesthetic spray to numb your throat, and/or with conscious sedation, where you will be awake but very relaxed. For some patients, Entonox (gas and air) can be used in addition to local anaesthetic spray and/or conscious sedation to aid relaxation. During the investigation, we may need to take some tissue biopsies (samples) for examination. The samples will be retained. A video recording and/or photographs may also be taken and kept with your health records.

Your endoscopy will be performed by either a consultant endoscopist or a nurse endoscopist. We have a team of highly skilled nurse endoscopists in the delivery of this service and work in partnership with our consultants. We have training lists which you will be informed of on the day should you wish to decline the trainee being present.

Guidance for Patients

Why do I need to have a gastroscopy?

- To try and find out the cause of your symptoms. For example, indigestion, anaemia, weight loss, vomiting, passing black motions (faeces), vomiting blood or difficulty swallowing.
- To help with treatment and if necessary, to decide on further investigations.
- Do a follow-up inspection of previous disease

Are there any risks associated with this procedure?

Although the following complications can occur, they are rare:

- Damage to teeth or bridgework.

- Perforation or tear of the lining of the stomach or oesophagus, which could result in you being admitted to hospital (risk approximately 1 in every 3,000 examinations). Although perforation generally needs surgery to repair the hole, it is sometimes possible to treat it with antibiotics and intravenous fluid.
- Bleeding may occur at the site of the biopsy, but this nearly always stops on its own.
- If you have any food or fluid left in your stomach before the procedure and you vomit before the gastroscopy, this can end up on your lungs causing infection which may require treatment with antibiotics. This complication is known as aspiration.
- Conscious sedation can occasionally cause problems with breathing, heart rate and blood pressure. If any of these problems do occur, they usually do not last long. Careful monitoring by a fully trained endoscopy nurse ensures that any potential problems can be identified and treated rapidly.
- Lost/missed tissue samples which may require a repeat gastroscopy and/or delayed diagnosis.

Are there any alternatives to this procedure?

- Investigations such as barium x-rays can be used to detect abnormalities, but they have the disadvantage of not allowing tissue samples to be taken. They also give less information than gastroscopy.

Additional information

While waiting for your procedure, it is important to maintain a healthy lifestyle. To support our local residents to stop smoking or lose weight, the following services have been commissioned to provide free stop smoking and weight management support to our community.

Call: Andover War Memorial Hospital - 01962 863 535

Basingstoke and North Hampshire Hospital - 01256 473 202

Royal County Hampshire Hospital - 01962 863 535

Email: myplannedcare@hhft.nhs.uk

Website: www.hampshirehospitals.nhs.uk

Health Lifestyles – We are here to help you and offer different levels of support to maintain a healthy weight and to stop smoking including telephone support, virtual and app-based support options.

Stop Smoking Service - <https://www.smokefreehampshire.co.uk/>. The stop smoking service provides a range of options to help you quit including support from an advisor, stop smoking medications, e-cigarettes and a digital offer for those who wish to quit by themselves.

If you are not ready to quit just yet but would like more information on how to protect your family, **Smoke Free Homes**, advises on how to make your home and car smoke free.

Weight Management Service - www.shapeup4lifehampshire.co.uk. The service supports adults aged 18 years or over who want to lose weight and have been identified as obese.

Find out your BMI

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This information has been reviewed and approved by Hampshire Hospital NHS Foundation Trust's chief medical officer, Dr Lara Alloway.

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You can get help to lead a healthier lifestyle if you're an adult (18 years or over) living in Hampshire (but not Southampton or Portsmouth) and your body mass index (BMI) is above average. [Use the NHS calculator to find out your BMI](#). If it's too high, sign up for a programme that will help you lose weight.

BMI of 30+.

If your BMI is 30 or higher, you qualify for free support from [Shapeup4life Hampshire](#).

BMI of 28+

You can get free support from Shapeup4life Hampshire if you haven't paid to attend sessions with a commercial weight management provider in the last three months, and at least one of the following applies:

- you have Type 1 and 2 Diabetes or Metabolic Syndrome.
- you have problems with your heart, circulation, hypertension or high blood pressure.
- you have been diagnosed with anxiety/depression.
- you need to lose weight before receiving another medical treatment or surgery.
- you have a serious long-term health condition that is adversely affected by your weight such as muscular skeletal disorders (back pain, mobility issues) and asthma.
- you're from a black or ethnic minority background.

[Learn more and sign up with Shapeup4life Hampshire](#)

BMI of 25+

If you have a Body Mass Index of 25 or higher, [the NHS Weight Loss Plan](#) will help you start healthier eating habits, be more active, and start losing weight.

The [NHS 12 week fitness plan](#) will support your weight loss plan as well as improve your health. This is aimed at beginners and will help get you into the habit of regular exercise over the course of the programme. It is structured but flexible enough to allow you to fit the exercise sessions around your other weekly commitments.

Healthy eating and being active

Information and advice on healthy eating and becoming more active is available from:

- [One You Eat Better](#) (website) - includes Easy Meals app for healthy meals and the Change4Life Food Scanner to help reduce levels of sugar in your diet.
- [Better Health - Get Active](#) (website) - includes tips on getting active for all, including the downloadable Active 10 app, as well as tailored advice for those living with a long-term condition.
- [Sugar Smart](#) is a campaign to raise awareness of hidden sugars, recommended levels and healthy alternatives by encouraging individuals, groups, businesses, schools and organisation to join the

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campaign and make a pledge. To find out how you can join in, become sugar smart and make good choices about what you, your family, colleagues eat.

What should I do if my health is deteriorating?

If your condition suddenly worsens whilst you are waiting you should seek advice.

Urgent Health Advice

For urgent health advice about physical or mental health, when it's not an emergency, please call 111 from any landline or mobile phone. You can also visit www.nhs.uk. The NHS 111 service is available 24 hours a day, seven days a week.

Life Threatening Emergencies

For something life threatening – severe bleeding, breathing difficulties or chest pains – please dial 999.

GP surgeries are still open

If you experience an increase in pain, inability to weight bear on this limb or a significant reduction in mobility, you should in the first instance contact your General Practitioner for review and advice.

GP surgeries are still open and are working differently to how they did before the COVID-19 pandemic. GP practices continue to make best use of telephone, online and video consultations. Face-to-face appointments are still being given to those who need it.

When you phone or use an online form to contact your GP surgery to make an appointment, you will be asked some questions which are designed to help staff guide you to the most appropriate clinical person to help you with your condition. This could be a nurse, clinical pharmacist, physician's associate, GP or paramedic.

A list of GP practices with relevant contact details are available on the following website:

<https://www.nhs.uk/Services/Trusts/GPs/DefaultView.aspx?id=163127>

Contact Us

A dedicated e-mail address for My Planned Care enquiries: myplannedcare@hhft.nhs.uk