My Planned Care Patient Information Platform





Gastroscopy

Introduction

A gastroscopy is a procedure where a thin, flexible tube called an endoscope is used to look inside the oesophagus (gullet or food pipe), stomach and first part of the small intestine (duodenum). It's also sometimes referred to as an Upper Gastrointestinal (GI) Endoscopy.

The endoscope has a light and camera at one end. The camera sends images of the inside of your body to a television screen.

You have been advised to undergo this investigation to find the cause for your symptoms, help with treatment and if necessary, to decide on further investigation. There are many reasons for this investigation including:

- Indigestion or acid reflux
- Anaemia
- Weight loss
- Vomiting
- Passing black motions
- Vomiting blood
- Difficulty swallowing
- Diagnosing Coeliac Disease
- Upper abdominal pain

If none of these apply to you, your doctor will explain any other reasons there may be for having this test.

A gastroscopy often takes less than 15 minutes, although it may take longer if it's being used to treat a condition. It's usually carried out as an outpatient procedure, which means you will not have to spend the night in hospital.

It is important that you are comfortable during the procedure to ensure that the endoscopist can perform the procedure successfully.

Before the procedure, your throat will be numbed with a local anaesthetic spray. You can also choose to have a sedative, if you prefer. This means you will still be awake, but will be drowsy and have reduced awareness about what's happening.

Please don't miss your endoscopy appointment. It's safe, and it's important you have it.

Some patients have been worried about attending for their Gastroscopy during the COVID-19 pandemic. Please be assured that there are measures in place to keep you safe when you attend your appointment.

Version 1: August 2022

My Planned Care Patient Information Platform

The risk of missing a diagnosis and any possible treatment far outweighs what is now a low risk of catching any infection in hospital. Click here for more information.

Guidance for Patients

While you are waiting for your gastroscopy, ensure that you maintain a healthy diet and avoid anything that make your symptoms worse. Cutting down alcohol and stopping smoking often help with many conditions that affect the gullet and stomach. Do not use overthe counter anti-inflammatory medicines (such as ibuprofen) unless advised by a doctor.

Once your Gastroscopy is scheduled, the hospital will send you some instructions about how to prepare ahead of your appointment.

You will be asked not to have anything to eat for at least 6 hours before the procedure, but small sips of water can be taken until two hours before your appointment time. This will ensure your stomach is empty and the doctor will have a clear view during the test.

If you're taking a medicine to thin your blood, such as warfarin or clopidogrel, you may need to stop taking it for a few days before having an endoscopy. This is to help prevent bleeding during the procedure. However, do not stop taking any prescribed medicine unless a GP or specialist tells you to.

It is very important to follow the instructions on the letter from the hospital.

After the procedure you will be given some time to recover from the procedure. If you chose to have throat spray, you will be offered a cold drink when the sensation in your throat has returned to normal.

If you received sedation, it usually takes 30 minutes for the initial effects of sedation to wear off although some people may feel fully alert immediately after the procedure. While you recover you will have your oxygen levels, blood pressure and heart rate monitored. The sedation can remain in your blood system for up to 24 hours and you can feel drowsy with lapses of memory. You won't be able to drive after having sedation, so you will need to arrange for someone to escort you home and supervise you for this 24 hour period.

What should I do if my health is deteriorating?

If you develop NEW symptoms such as difficulty swallowing, severe pain, persistent vomiting, vomiting blood, passing black stools or rapid weight loss then contact your GP or specialist as you may need a more urgent review. Equally, if you have existing symptoms that have changed in nature or deteriorated quickly then you should seek further advice and reassessment.

If your appointment has come through but your condition is getting worse, you should contact the hospital team or Patient Advice and Liaison Service (PALS). The number and email for this should be on the hospital appointment letter.

If you haven't yet received your hospital appointment and your condition is getting worse, you should contact your GP practice. Your GP cannot get you seen quicker at the hospital as they don't have access to the waiting list or appointment system. However, if your condition is getting worse or if you are experiencing new symptoms, they can assess the situation, give you some advice and may be able to update your specialist to consider upgrading your procedure.

My Planned Care Patient Information Platform Alternatively, the NHS 111 service is available if you have a medical problem and aren't sure what to do. The service is available 24 hours a day, 7 days a week by calling 111 or visiting 111.nhs.uk.

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