



HAVING A FLEXIBLE SIGMOIDOSCOPY

THE TEST

Flexible sigmoidoscopy is a test which allows the doctor to look at the lower part of your intestine. The test is performed with a flexible sigmoidoscope, a flexible tube about the size of the index finger. The test usually takes about 5-10 minutes.

You may be asked to take a purgative preparation before the procedure. You can have a light meal before you come, provided that gastroscopy is not to be undertaken at the same time. Please let us know if you are on blood-thinning medication e.g. warfarin, aspirin or clopidogrel, or if you are diabetic, especially if on insulin, as special precautions requiring medication and diet may have to be followed. Please check with us or your doctor if you have any queries.

On arrival, you will be greeted by a nurse who will take your pulse and blood pressure. False teeth should be removed. You will usually be given an enema.

THE PROCEDURE

The nurse will stay with you throughout the test. You will be asked to lie on your left hand side and the sigmoidoscope passed into your rectum. You may feel uncomfortable, as if you want to empty your bowel. This is because the sigmoidoscope is felt by the intestine to be a motion. Any pain is usually short-lived, as the scope passes round corners, and not too severe. A small amount of air will be put into your intestine to give the doctor a clear view. Sometimes biopsies are taken but this is quite painless.

After the test you will be able to eat and drink normally. For several hours you may feel bloated from air introduced during the procedure. You may also get some wind pains but these will pass off as the air is gradually discharged from the passage. If biopsies have been taken there may be a small amount of bleeding from the back passage.

Normally the test is performed without sedation. However, occasionally, sedation is used and the precautions listed below will then apply.





POSSIBLE SIDE-EFFECTS

There is a very small chance that the sigmoidoscope will cause damage (bleeding or perforation) to your intestine, which may need surgical repair. Additionally, although there is a wide range of variability, endoscopic examination can be fairly stressful. As such the effect on the heart and lungs may be comparable to a certain degree of physical exertion. This may be relevant in patients with asthma, bronchitis or heart disease. These side effects are very uncommon, but can be potentially serious or even life-threatening. If there should be any problems or concerns after the test, please contact the Parkside Hospital at 8971 8000. Outside working hours please contact the Accident & Emergency Department of your local hospital or your general practitioner.

ALTERNATIVE TESTS

A barium enema X ray is sometimes used to examine the colon. It is less invasive than colonoscopy but involves the use of radiation. Flexible sigmoidoscopy is more accurate than barium enema to look at the lower bowel. With barium enemas, biopsies cannot be taken nor polyps removed. A total colonoscopy is often performed to examine the whole colon. This is essentially the same examination as the flexible sigmoidoscopy, except for the extent of examination. Special bowel preparation is required before colonoscopy can be performed.

IF SEDATION WAS GIVEN

With sedation, you may be drowsy after the procedure. Although the doctor will discuss the findings and treatment plan with you after the procedure, you may not remember the conversation, and it is normally best to attend a follow-up clinic appointment for a dull discussion. The doctor will however speak to a relative or friend if you wish. You may not drive or cycle for 24 hours afterwards and it is unwise to operate machinery or make important decisions. There is a small risk of excessive sedation which may suppress the breathing and be potentially serious. With any medication, including the local anaesthetic, there is a small risk of an allergic reaction.

***If you have any queries or concerns please do not hesitate
to contact us on Tel: 020 8337 9609***

