

## Flexible Sigmoidoscopy with an Enema

**You must read this booklet at least seven days before your test**

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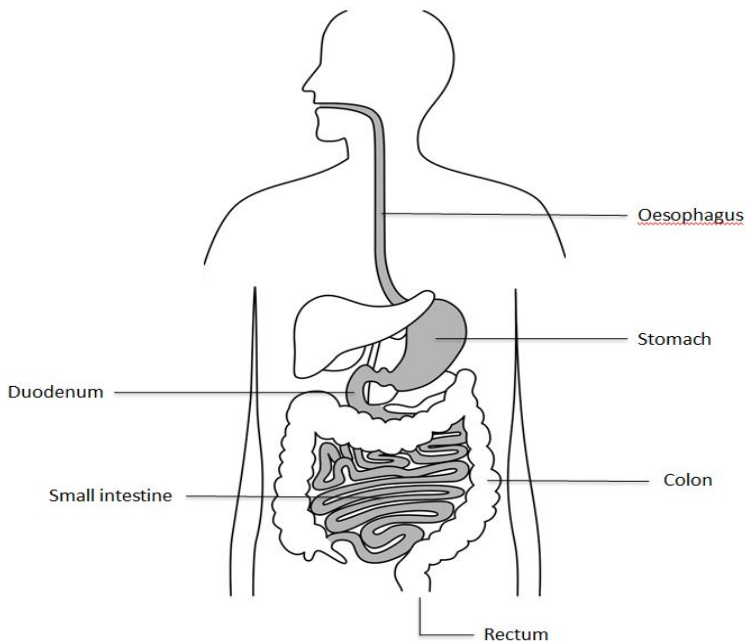
### **What is a flexible sigmoidoscopy?**

An endoscopy is a procedure where the inside of the body is examined using a flexible tube with a light source and a camera at the end, called an endoscope. A sigmoidoscopy is an endoscopic procedure where the tube is passed through the anus into the rectum and through the lower sections of the colon, called the sigmoid and descending colon. Pictures are transmitted to a TV screen, enabling the endoscopist to look at the lining of this part of the lower gastro-intestinal (GI) tract. (Please see the diagram on page 2.)

### **Why is it necessary?**

The procedure is done to help your doctor make a diagnosis or exclude serious problems. Samples (biopsies) and photos are often taken to help with this.

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**What are the risks?**

A sigmoidoscopy is a very safe procedure but like any invasive test there are risks. Your doctor will have weighed up the risks against the benefits before requesting one.

There is a small risk of bleeding if samples are taken (this usually settles on its own) and an extremely small risk of causing a tear. In very rare cases an operation may be required to deal with a complication.

**What is it like?**

A sigmoidoscopy is usually a quick test and the tube is rarely inside you for more than 15 minutes. It can be uncomfortable but is rarely painful. If you are finding it painful you can be given gas and air (Entonox).

**Is there an alternative?**

No other test allows direct views of this part of the lower GI tract and the ability to take samples.

**Preparing yourself for a flexible sigmoidoscopy**

**Changes to medications**

If you take iron tablets it is best that these are stopped a week before the test.

**Blood thinning drugs:**

- Aspirin                      Clopidogrel                      Warfarin
- Prasugrel (Efient)      Ticagrelor (Brilique)      Dabigatran (Pradaxa)
- Rivaroxaban (Xarelto)      Apixiban (Eliquis)      Edoxaban (Lixiana)

These medications increase the risk of bleeding. They are commonly prescribed if you have or are at risk of heart problems, strokes, blood clots or other vascular problems.

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It is safe to have a flexible sigmoidoscopy and take samples whilst you are on a blood thinning drug but it is not safe to perform therapeutic procedures such as removing polyps. If these are found during a diagnostic procedure, the procedure may have to be repeated.

If you take warfarin check your INR a week before the procedure. If it is above the therapeutic range contact the referring clinician for advice. Your INR will be checked on the day of the procedure to ensure taking biopsies is still safe. If you take Rivaroxaban, Apixaban, Edoxaban or Dabigatran, omit these on the day of the procedure to minimise the risk of bleeding if samples are taken.

If you take a combination of blood thinning drugs contact the referring clinician to ask for advice, as the risk of bleeding increases and this must be balanced against the risk of stopping one of your blood thinning drugs.

### **The enema**

You will have been sent an enema which will help you have a bowel movement so the bowels are empty before the endoscope is inserted. The instructions for how to administer this are in the enema box.

Whilst an enema is a rather personal procedure, assistance from a relative may be helpful. Please give the enema two hours before your appointment time. If you are unable to have your enema at home, please contact the endoscopy bookings team on 01206 742656 so that arrangements can be made for this to be given in the endoscopy unit.

After you have taken the enema, have nothing to eat or drink.

Occasionally the enema does not empty the lower bowel sufficiently and this can prolong the procedure or even cause the endoscopist to stop. In some circumstances it may be necessary to repeat your test with full bowel prep, like that used when the whole of the colon is examined.

### **On the day of your test**

#### **What shall I bring?**

- your appointment letter
- a list of your regular medications
- your insulin (if you are diabetic)
- something to keep yourself occupied whilst you wait.

Please remove nail varnish, jewellery (including piercings) and lipstick before coming to hospital. As there is no safe place to store valuables whilst you are having your procedure we suggest you leave these at home or with your friend/relative.

#### **Where do I come?**

Report to Reception at the Elmstead Day Unit (situated at the rear of the hospital – please see the map at the end of this leaflet).

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Your family or friends can drop you off but there is no parking except for disabled badge holders. If you are planning to drive please use one of the visitor car parks situated at the front of the hospital and bring change for the machine, as you may need to park for several hours.

**What if I need help with transport?**

If you are unable to get to the hospital and require help, please contact your GP to arrange transport. Please emphasise that this is a day case procedure rather than an outpatient appointment and that you will be at the hospital for several hours.

**What will happen when I arrive?**

You will be given a form to fill in and asked to sit and wait until a nurse is available to take you through to the admission area. Every effort is made to ensure that your wait is as short as possible but delays can happen if emergency cases have to be prioritised and procedures take longer than expected. Under these circumstances you may have to wait 1-2 hours before you are admitted.

During the admission process the nurse will take some details (personal information, medications, allergies and medical problems). A nurse or doctor will then explain the procedure (and the risks and benefits) and ask you to sign a consent form. Once admitted you will be taken to a bed space as soon as one becomes available and asked to undress from the waist down. You will be given a pair of dignity shorts to wear instead of your underwear, and a gown. If you feel the cold we recommend you bring a dressing gown and slippers to wear over the gown while waiting.

**What will happen in the procedure room?**

A few checks need to be done before the procedure is started and you will be introduced to the endoscopist and the nurses in the room. You will be made comfortable, lying on your left side with your knees pulled up towards your chest before the test is started. The endoscope is then inserted. If you find it painful you can ask for gas and air (Entonox).

**What happens after the procedure?**

You will be given time to recover back on the ward and once dressed you will be given something to eat and drink, if you wish. If you are being collected a nurse will then phone your friend or relative.

**When do I get the results?**

The endoscopist may explain the findings in the procedure room. If not a nurse will give you the report and go through it before you leave. A report will also be sent to your GP and the doctor who requested the test.

If samples have been taken, these will be sent to the pathology laboratory. The clinician requesting the procedure should be able to access the results on an urgent sample after a week but for non-urgent samples it may take several weeks.

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### **How long will I be at the hospital?**

Whilst the tube is rarely inside you for more than 15 minutes, the whole process can take a couple of hours, because you may have to wait a while before you are admitted if there have been emergencies or lengthy procedures before you.

### **Friends and relatives**

Friends and relatives are not allowed beyond reception in the Endoscopy Department unless they are needed to help care or communicate with patients. We recommend they leave a contact number so we can call them when you are ready to leave, as you may be in department for several hours.

### **Who to contact for help and advice**

For questions relating to your appointment, please contact the bookings team by phone on 01206 742656 or by email: [endopatientbookings@nhs.net](mailto:endopatientbookings@nhs.net)

If you have diabetes and have questions about your medications not addressed above, please phone the Diabetes Specialist Nurse on 01206 742159.

If you have questions about blood thinning drugs or are concerned that you should not be taking the bowel prep due to a pre-existing medical condition, please phone the secretary of the referring clinician (listed on the appointment letter), via the hospital switchboard, on 01206 747474.

### **Verifying your identity**

When you attend hospital you will be asked to confirm your first and last names, date of birth, postcode and NHS number if you know it, and to let us know if you have any allergies.

### **Comments, compliments or complaints about your care**

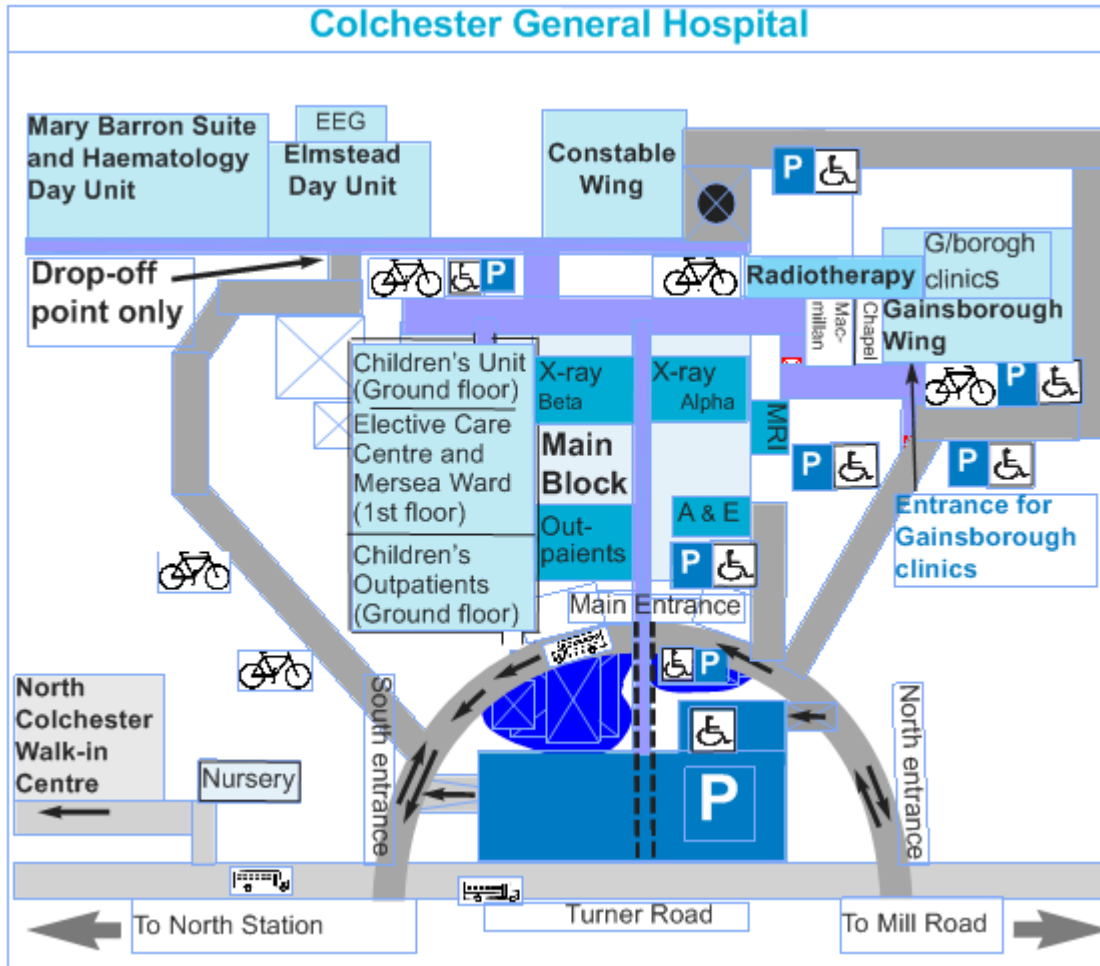
Please raise any concerns in the ward or department you are in. Ask to speak with the ward sister, matron or department manager. If your concerns cannot be resolved or you wish to make a formal complaint, please call PALS (Patient Advice & Liaison Service) on 0800 783 7328, pick up a PALS leaflet or visit <http://www.colchesterhospital.nhs.uk/pals.shtml>

### **Your views**

If you or a family member has recently been in Colchester General Hospital, you can tell us about your experience by searching for 'Colchester' on the NHS Choices website ([www.nhs.uk](http://www.nhs.uk)), by writing to the address on the front of this leaflet, by emailing your comments to [info@colchesterhospital.nhs.uk](mailto:info@colchesterhospital.nhs.uk) or by filling in a questionnaire at the hospital telling us if you would recommend our service to a friend or family member.

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## Map of Colchester General Hospital Site



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