

Endoscopy department

Understanding flexible sigmoidoscopy

Information for patients

Name:

Hospital number:

Your appointment is on:at:

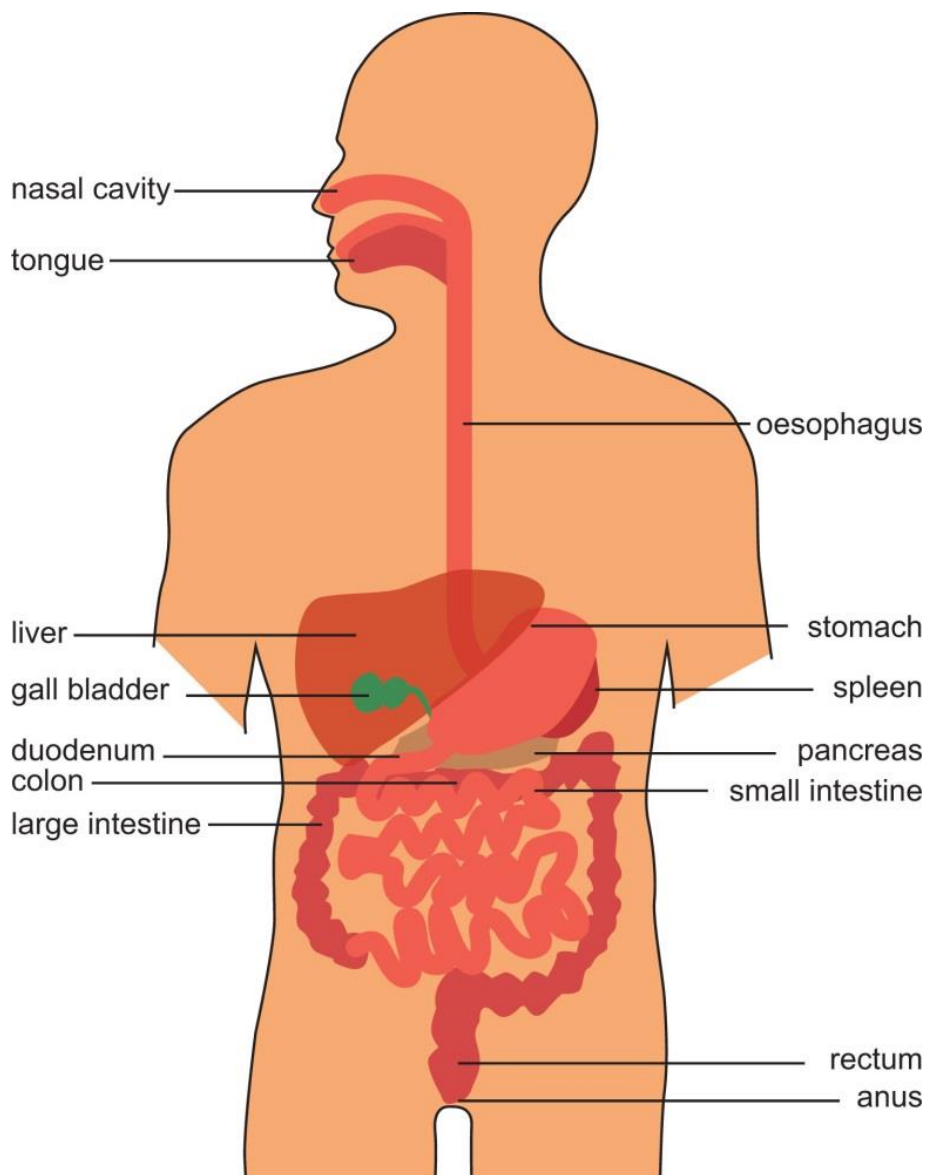
Charing Cross / Hammersmith / St Mary's Hospital

If you have any questions or concerns about your appointment, bowel preparation or regular medication please do not hesitate to contact the patient service centre on **020 3312 6010**.

Introduction

This leaflet is designed to help you prepare for your colonoscopy. **Please read this at least one week before your appointment and follow the instructions carefully.**

If you do not attend your appointment we will refer you back to the healthcare professional who requested this investigation for you.



What is flexible sigmoidoscopy?

Flexible sigmoidoscopy is a visual examination of the lining of the rectum (bottom) and part of the colon (large intestine). A sigmoidoscope (a long, flexible tube) is passed into the anus, through the rectum and into the lower part of the colon. Using the light on the end of the sigmoidoscope, the endoscopist is able to look for any abnormalities. If necessary, biopsies (small samples of tissue) can be taken during the examination and sent to the laboratory for further investigation.

Are there any alternatives to flexible sigmoidoscopy?

The main alternative to the test is a CT pneumocolon (computed tomography) scan or virtual colonoscopy. This is

a CT scan of your large bowel. A small tube is inserted into your anus and carbon dioxide gas is used to inflate the bowel so that it can be seen. Scans are taken when you are lying on your back and possibly your front. It can show up polyps (abnormal growths of tissue) and tumours, but unlike flexible sigmoidoscopy, cannot remove them. A CT pneumocolon can also not detect tiny areas where there is bleeding, which may lead to anaemia.

Are there any risks associated with flexible sigmoidoscopy?

Complications are rare. There is less than a 0.1 per cent risk of the following occurring after flexible sigmoidoscopy:

- bleeding after biopsies have been taken
- perforation (tearing) of the bowel lining, which may require surgery to repair it

The risk of complications may be increased if treatments such as stretching a narrow area are required, or if you have any pre-existing heart or lung conditions. Your endoscopist will discuss any increased risks with you before you have the test.

Is there anything I should do to prepare for my appointment?

- Stop taking any iron supplement tablets seven days before your appointment
- You can eat and drink as normal before the test
- Shortly after your arrival we will ask you to change and give you an enema to empty your bowel. This enables the endoscopist to see the bowel lining clearly

What happens on the day of the test?

The flexible sigmoidoscopy will be done as close to your appointment time as possible. Every effort is made to keep waiting times to a minimum, but it is not possible to say how long individual procedures will take. You may wish to bring something to read with you. If you regularly take medicines in the morning, you should take them as normal, unless you have been advised otherwise.

We advise you to wear loose-fitting clothes to your appointment as during the procedure the endoscopist will introduce air into your colon (see below), which may cause bloating afterwards. The bloating will go down, but loose-fitting clothes will be more comfortable.

We will ask you to change into a hospital gown and dignity shorts in the pre-admission room. We will give you an enema to empty your bowel so that the endoscopist can see your bowel lining during the test.

Once this has worked the endoscopist will discuss the procedure, any treatment, possible risks, expectations and side effects before asking for your written consent. This written consent should not feel rushed and will be obtained in an admission room before your procedure. You will then be taken into the procedure room.

We will ask you to lie on your left side on a trolley, with your knees slightly bent. We will place a small probe on your finger to monitor your pulse and blood oxygen levels during the test.

The endoscopist will pass the sigmoidoscope (a long, flexible tube) through your anus and into your lower colon and introduce air to expand it. This will help the endoscopist to see inside your colon. You may experience a feeling of pressure, bloating or cramping during or after the procedure due to the air that was introduced. This will settle quickly once you have passed wind.

If the endoscopist thinks an area needs further investigation, they might pass an instrument through the sigmoidoscope to obtain a biopsy (a sample of the lining of the colon) for testing in the laboratory. Biopsies are used to diagnose many conditions and your doctor might request one even if they do not suspect cancer.

Your endoscopist may also find polyps during flexible sigmoidoscopy. Some harmless polyps (known as hyperplastic) might not need to be removed, but others (known as adenomas) are potentially pre-cancerous and your endoscopist may ask you to have a colonoscopy. This is a complete examination of the colon, in which any large polyps or small adenomas can be removed.

The flexible sigmoidoscopy takes about ten minutes to complete.

Please note

Imperial College Healthcare NHS Trust supports the training of medical, surgical and respiratory registrars as well as nurse endoscopists. Your consent or procedure may be undertaken by any of these trainees who are supported and supervised by qualified trainers within the endoscopy department.

What happens after the test?

We will take you to the recovery area to rest for a short time. You can then change your clothes and go home.

You should be able to return to work and all your usual activities the day after your appointment.

When will I get the results?

We will give you a copy of the flexible sigmoidoscopy report and discuss the findings with you before you are discharged. It can take up to one week for biopsy results to be available and these will be sent to your referring doctor (either your GP or hospital doctor). Details of the results and any necessary treatment should be discussed with them at your next appointment. The endoscopy department will not be able to give you any biopsy results.

Is there anything I need to watch out for at home?

It is normal to experience small amounts of bleeding from your bottom for several days after having a flexible sigmoidoscopy. However, if you have any severe pain, black tarry stools or persistent bleeding in the hours or days after your flexible sigmoidoscopy, please either call your GP or the hospital switchboard and ask to speak to the gastroenterology registrar on call:

- Charing Cross Hospital: 020 3311 1234
- Hammersmith Hospital: 020 3313 1000
- St Mary's Hospital: 020 3312 6666

Alternatively you can call your GP or NHS 111.

How do I make a comment about my visit?

If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3313 0088** (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or **020 3312 7777** (St Mary's and Western Eye hospitals). You can also email PALS at **imperial.pals@nhs.net**

Alternatively, you may wish to express your concerns in **writing** to: Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street, London W2 1NY.

Email: **ICHC-tr.Complaints@nhs.net**

Telephone: **020 3312 1337 / 1349**

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team:

imperial.patient.information@nhs.net