

Imaging department

CT colonography

Information for patients, relatives and carers

Introduction

This leaflet tells you more about computed tomography (CT) colonography. Please feel free to ask our team any questions you have about the information below.

What is a CT colonography?

CT colonography, also called virtual colonoscopy, is used to examine the large bowel (colon) to detect any changes or abnormalities. It uses a CT scanner to produce two- and three-dimensional images of the bowel.

Is there anything I need to do to prepare for CT colonography?

People with **diabetes** must read and follow the instructions in the section 'special information for people with diabetes' on page 3. All other patients must follow the instructions on page 2. **If you do not follow the instructions we might miss important findings.**

Please let us know if you have **asthma** or are **allergic to any medications** or to the x-ray dye (called contrast medium) used for CT scanning.

We try to avoid doing scans on pregnant women, so please tell your doctor and the radiographer performing the exam **if you are pregnant or think you may be before the scan.**

You will need to empty your bowel for this exam to ensure that the images taken during the scan are as clear as possible. Two days before the scan, you will need to change your diet and take some special medication (bisacodyl and Gastrografin) to help with that. You will receive the preparation through the post, or your doctor, or the specialist nurse will have given you a prescription to collect it from the hospital pharmacy.

If you did not receive the medicine in the post or the prescription to collect it, please contact the Imaging department (our contact details are listed further down this information sheet), or specialist clinic which referred you.

Information for people who do not have diabetes

Two days before the scan

- **stop** eating high fibre foods including bran, bran-containing cereal, brown bread, brown rice, fruit and vegetables
- **eat low fibre food such as** white rice, bread and pasta, boiled or poached eggs, cream sauces, fish, chicken, thin soups, cheese, jellies, ice cream and powder-based desserts such as custard
- **drink plenty of clear fluids** such as water, clear soups, strained fruit juice (without pulp), drinks made with beef and yeast extracts, squash, and tea and coffee with a small amount of milk only
- **continue** taking your medications as usual. If your medications are to be taken with meals, please ensure that you only eat something from the 'allowed foods' listed above
- **stop** taking any iron and anti-diarrhoea tablets
- take two tablets (total of 10mg) of a gentle laxative (bisacodyl) with your evening meal

The day before the scan

09.00 Take 50mls of the prescribed x-ray dye (Gastrografin) and have only a small breakfast from the allowed foods list. Gastrografin will help clear the bowel and 'paint' any stool that remains in the bowel, so the radiologist (x-ray doctor who will read your scan) can differentiate between bowel abnormalities and stool residue.

Taking Gastrografin and bisacodyl will make you open your bowels more often than usual. Therefore, please ensure that you have easy access to a toilet the day before the scan and on the morning of the scan before you come to hospital.

Please ensure that you drink plenty of clear fluids throughout the day from the list above.

Please do not eat any solid foods or dairy products after breakfast until the scan has been performed.

17.00 Take 20mls of Gastrografin.

On the day of the scan

On the morning of your scan take another 20mls of Gastrografin, you can have some tea or coffee without milk and any medications that you take. Do not eat anything until after your scan. We recommend bringing a snack with you to your appointment and you can eat this once the scan is completed.

Please bring with you a list of your medications, allergies and medical problems you may have. This will help us if we need to give you any medications during your scan.

Due to the effects of the bowel preparation, if you take an oral contraceptive pill, you should use additional types of contraception for the rest of your cycle.

Special Information for people with diabetes only

If you have diabetes please ensure that you discuss this procedure with your diabetes nurse specialist at your GP surgery or in hospital.

Two days before the scan

- **stop** eating high fibre foods including bran, bran-containing cereal, brown bread, brown rice, fruit and vegetables
- **eat low fibre food such as** white rice, bread and pasta, boiled or poached eggs, cream sauces, fish, chicken, thin soups, cheese, jellies, ice cream and powder-based desserts such as custard.
- **drink plenty of clear fluids** such as water, clear soups, strained fruit juice (without pulp), drinks made with beef and yeast extracts, squash, and tea and coffee with a small amount of milk only
- **continue** taking your tablets or insulin as usual, including on the morning of the scan. If your medications are to be taken with meals, please ensure that you only eat something from the 'allowed foods' listed above. However, you may be at risk of a hypoglycaemic episode which means a low blood sugar level. Symptoms of this include shaking, sweating, blurred vision and dizziness. For this reason it is important that you continue to check your blood sugar levels and, if your sugar is low, have sugary and high energy drinks. Please make sure that you bring something to eat and drink for after the scan
- **stop** taking any iron and anti-diarrhoea tablets
- take two tablets (total of 10mg) of a gentle laxative (bisacodyl) with your evening meal.

The day before the scan

09.00 Take 50mls of Gastrografin and have something from the 'allowed foods' list for breakfast.

13.00 Have a lunch of something from the 'allowed foods' list above

17.00 Take 20mls of Gastrografin and have something from the 'allowed foods' list for dinner.

Taking Gastrografin and bisacodyl will make you open your bowels more often than usual. Therefore, please ensure that you have easy access to a toilet the day before the scan and on the morning of the scan before you come to hospital.

Please ensure that you drink plenty of clear fluids throughout the day from the list above.

On the day of the scan

On the morning of your scan, you can have a light breakfast from the 'allowed foods' list and take the last 20mls of Gastrografin.

Due to the effects of the bowel preparation, if you take an oral contraceptive pill, you should use additional types of contraception for the rest of your cycle.

What are the risks and benefits of having the scan?

The benefit of a CT colonography is that it is a relatively safe and quick procedure, which gives your doctors detailed information about your bowel.

- the most common problem patients experience during the scan is the feeling of bloating or pressure when the gas is put in. However, the discomfort should start to ease after a few minutes as the gas is absorbed by the body
- the medicine to relax the bowel can cause some blurring of vision and some people may have a dry mouth. However, these symptoms should pass after about 20 minutes. In very rare circumstances, the medicine may cause or exacerbate a type of glaucoma and you should tell us when prompted if you have a history of eye disease
- there is a very small risk associated with CT examinations because, as with all x-ray examinations, it requires the use of ionising radiation. The amount of radiation received during this exam is equal to that received from the atmosphere over about a three-year period. However, CT scans have a long track record for being safe as well as providing doctors with vital diagnostic information
- perforation (puncture) of the bowel is rare and occurs in about 1 in 3,000 patients. When it happens, most patients recover without any further treatment but may need to be admitted to hospital for further care
- there is also a small risk of reaction to the injected contrast medium if used in the examination. This is very rare and occurs in 1 in 40,000 patients

The radiographer performing the procedure will discuss these risks with you before starting and will be happy to answer any questions you may have. Please remember that the benefits of having this procedure outweigh the potential risks. If you do not have the scan, we may be unable to find out important information about your health and offer the best possible treatment, if needed.

There is a pre-examination form provided at the back of this leaflet (page 8). Please read it and ensure you bring it with you on the day of your scan.

Are there any alternatives to this procedure?

Yes - conventional colonoscopy can also be used to examine the bowel. A colonoscopy involves passing a scope (thin tube with a bright light at the end of it) through a patient's back passage into their bowel, so that the doctor can see the inside of it.

Your doctor will only have recommended CT colonography if they feel that this is the best way to find out more information about your condition. Some patients may need both a colonoscopy and the CT colonography – your doctor will discuss this with you.

What happens on the day of the scan?

Please come straight to the imaging (x-ray) department and report to reception when you arrive. The radiographer performing the scan will check your details and ask if you have any allergies or suffer from diabetes or any heart problems.

We will ask you to change into a hospital gown. You may be given an intravenous (directly into a vein) injection of a medicine to relax the bowel so that you feel less discomfort during the exam.

First you will lie on your side on the scanner table. A trained member of staff will insert a small tube into your back passage and gas will be put through the tube to gently inflate the bowel and help create clearer images.

You will then lie on your back on the scanner table, which will be moved into the CT scanner and the first half of the scan will be performed. For the second half of the scan, you will turn over to lie on your front. For some people it can be easier to do the second half of the scan with you on your side. If necessary, you may have an intravenous injection of contrast medium (x-ray dye), which may help give us more information about the other organs shown on your scan.

The whole procedure takes about 20 minutes to complete. Sometimes further scans are necessary – your doctor will discuss this with you.

What happens after the scan?

Please let us know if you are feeling unwell.

The tube in your back passage and any tubes in your veins used to give you medication will be removed. You will be able to use the toilet if you need to.

We recommend that you have a snack and something to drink before you go home. You should bring something suitable with you. You can return to your usual diet straight after the scan. If you are going home alone, please wait until your vision has returned to normal. You should not drive yourself home after the test. However, you can resume your daily activities, including driving, two hours after the scan as long as your vision has returned to normal.

Is there anything I need to watch out for after the scan?

If you experience pain and redness in the eyes a few hours after the scan, please contact your GP or go to your nearest A&E immediately as you may have a type of glaucoma. If you have persistent abdominal (stomach) pain please contact the imaging department on the numbers below, or go to A&E.

When will I have my results?

You will not receive any results on the day of your scan. The radiologist will analyse your scan images and write a report. A copy of the report will then be sent to the doctor who requested the scan and they will discuss the findings and any further tests with you.

How do I get to the hospital?

Please visit the Trust's website for more information about travelling to our hospitals:
www.imperial.nhs.uk/our-locations

Contact details

Please do not hesitate to contact our imaging departments if you have any queries or concerns:

- **Charing Cross Hospital: 020 3311 1863**
- **Hammersmith Hospital: 020 3313 3389**
- **St Mary's Hospital: 020 3312 6418**

What if I cannot keep my appointment?

Please contact us as soon as possible. We can then offer this date to another patient and agree a new appointment date and time with you. You will find the appropriate telephone number on your appointment letter.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. 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 The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:

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**

Alternative formats

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.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

Imaging department
Published: May 2020
Review date: May 2023
Reference no:2689
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Pre-examination form

You must bring this with you on the day of your test.

I have read and understood the patient information leaflet including the risks and benefits involved in the test and I am happy to proceed.

YES

NO

I agree that my anonymised CT data may be used for teaching / training / research purposes.

YES

NO

Patient name (please print):.....

Patient signature:.....

Date:.....

If you have any further questions please feel free to ask these on the day of your test)

Departmental use only:

I confirm that I have checked that the above named patient has read and understood the CT Colonography Patient Information leaflet.

STAFF NAME (PLEASE PRINT):.....

JOB TITLE:.....

DATE:.....