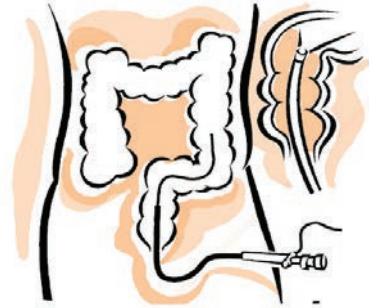


Information about

Flexible Sigmoidoscopy

What is flexible sigmoidoscopy?

Flexible sigmoidoscopy allows inspection of the lining of the rectum, anus and lower part of the colon. It uses a flexible tube with a 'video camera' at the tip. The instrument is about 1cm in diameter.



What preparation is required?

Your doctor will tell you what preparation is required. If you are not receiving a sedative medication for the procedure, there is no need to fast prior to the procedure. However, if your doctor plans to give you sedation for the procedure you will need to have an empty stomach. This will require fasting for 6 hours prior to the procedure. Usually, a small enema (a solution that is inserted into the rectum to clean the lower bowel) is the only preparation and it is given just before the procedure. Occasionally your doctor may decide not to use any preparation. It is unusual to require a full bowel clean out prior to this procedure.



Should I continue my current medications?

Most medications can be continued as usual. Inform your doctor about medications that you're taking - particularly blood thinning medications such as warfarin, aspirin, persantin, Plavix or Iscover.

What can I expect during flexible sigmoidoscopy?

You will lie on your side while your doctor advances the endoscope through the rectum and colon. You might experience a feeling of pressure, bloating or cramping during the procedure. This is normal.

What if the flexible sigmoidoscopy finds something abnormal?

If your doctor sees an area that needs further evaluation, he or she might take a biopsy (sample of the colon lining) to be analysed. Biopsies are used to identify many conditions, and your doctor might perform one even if he or she doesn't suspect cancer.

Polyps are growths from the lining of the colon, and can vary in size and type. If your doctor finds polyps, he or she might take a biopsy of them, remove them or might organise a colonoscopy in order to examine the entire colon.

What happens after a flexible sigmoidoscopy?

Your doctor will explain the results to you when the procedure is done. You might feel bloating or some mild cramping because of the air that was passed into the colon during the examination. This will disappear quickly when you pass gas. If you received sedative medications for your procedure, it is very important that you do not drive a car, travel on public transport alone, operate machinery, sign legal documents or drink alcohol for the rest of the day after the test. It is strongly advised that a friend or relative take you home and stay with you. If you did not receive sedation you will be able to drive afterwards.

What are possible complications of flexible sigmoidoscopy?

Flexible sigmoidoscopy and biopsy are very safe when performed by doctors who are specially trained and experienced in these endoscopic procedures. Complications occur very uncommonly, and include problems such as bleeding from a biopsy or polyp removal site and damage to the wall of the bowel (a perforation). These complications are rare, but it is important for you to recognise early signs of possible complications. Contact your doctor or the hospital if you notice severe abdominal pain, fevers and chills, or rectal bleeding.

Who can I contact if I have any questions?

If you have any questions or need advice, please consult your doctor prior to undergoing the procedure.

Digestive Health Foundation

This information leaflet has been designed by the Digestive Health Foundation as an aid to people who will undergo a flexible sigmoidoscopy or for those who wish to know more about this topic. This is not meant to replace personal advice from your medical practitioner.

The Digestive Health Foundation (DHF) is an educational body committed to promoting better health for all Australians by promoting education and community health programs related to the digestive system.

The DHF is the educational arm of the Gastroenterological Society of Australia (GESA). GESA is the professional body representing the specialty of gastrointestinal and liver disease. Members of the Society are drawn from physicians, surgeons, scientists and other medical specialties with an interest in gastrointestinal (GI) disorders. GI disorders are the most common health related problems affecting the community.

Research and education into gastrointestinal disease are essential to contain the effects of these disorders on all Australians.

Further information on a wide variety of gastrointestinal and liver conditions is available on our website – www.gesa.org.au

dhf

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This leaflet is promoted as a public service by the Digestive Health Foundation. It cannot be comprehensive and is intended as a guide only. The information given here is current at the time of printing but may change in the future. If you have further questions you should raise them with your own doctor.