Gastroscopy

Examination of the oesophagus, stomach and duodenum

Please note:

O Check the location where your examination will take place (Eindhoven or Veldhoven)

O Rules apply to what you can eat and drink from the night before the examination (from 00:00). See preparations.

If you take blood thinners, check with your doctor whether you may continue taking them.

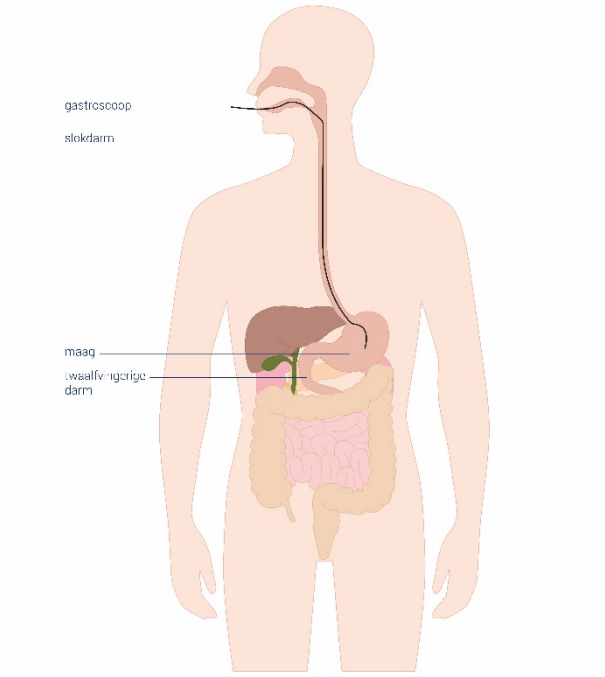
O If you are to be sedated but have not arranged transport home, the examination will not take place.

O If you are ill or unable to attend, please let us know as soon as possible.

O Your partner or family cannot be present during the examination.

Your practitioner has suggested that you undergo an exploratory examination of the oesophagus, stomach and duodenum. In medical terms, this is called a gastroscopy. This leaflet provides you with important information about the procedure and how to prepare for it. Please read it carefully so that you come to us well-prepared.

The information in this leaflet is of a general nature and is meant to give you an idea of the care and information that you can expect. This brochure is only an addition to the specific information from your specialist or practitioner.



What is a gastroscopy?

A gastroscopy can detect certain abnormalities in your oesophagus, stomach or duodenum. The examination is done with a flexible tube called an endoscope. The endoscope has a small video camera that allows you to watch the examination on a television screen. The endoscope can also be used to perform minor procedures: the doctor can remove a piece of tissue for further examination (biopsy), stop bleeding, stretch a constriction in the oesophagus or insert a feeding tube.

Medication

Blood thinners

Please inform your practitioner if you are taking blood-thinning medication (medication that affects clotting) when you schedule the examination.
You may need to temporarily adjust how you take this medication. Discuss this with your practitioner, and they will inform the thrombosis service if necessary.

STOP …… from……

If you only take Acetylsalicylic acid (Aspirin) or Carbasalate calcium (Ascal) as a blood thinner, you do not need to stop taking them before the gastroscopy.

Diabetes medication

Please inform your practitioner if you are taking medication for diabetes. You will receive tailored advice for both tablets and insulin use. You can resume your medication as prescribed once you are allowed to eat again after the examination.

Coagulation disorder

If you have a blood coagulation disorder, you must inform your doctor well before the examination.

Preparing for a Gastroscopy

Fasting

- Do not eat from 00:00 on the night before the gastroscopy.
- You may drink clear liquids up to 2 hours before the gastroscopy. Clear drinks include water, lemonade, apple juice, clear broth and tea. Do not drink anything in the two hours before the gastroscopy.
- If the gastroscopy takes place after 13:30, you may eat a rusk with jam before 07:30 on the day of the gastroscopy.
- You may not eat, smoke or chew gum in the two hours before the gastroscopy.
- Follow the preparation steps for a colonoscopy if you are undergoing a gastroscopy and a colonoscopy during the same appointment. You will then finish your preparation 2 hours before the gastroscopy.
- Different times for eating and drinking may apply if you are admitted to the hospital. The nurse will inform you accordingly.

Pacemaker

Please tell your doctor if you have a pacemaker or ICD. They will consult the pacemaker technician.

The gastroscopy

On the day of the examination, report to the Endoscopy Department at the appointed time. You may take a seat in the waiting room. A nurse will fetch you there. You will be given a drink that prevents foaming in the stomach before the examination (this is not an anaesthetic). If you have removable dentures, you will need to remove them. You will lie on your left side on the examination table, and the nurse will give you a mouth guard to protect the endoscope and your jaws and teeth.
The endoscope is a flexible tube about a centimetre thick. The doctor will insert the endoscope through the mouth guard into your throat and ask you to swallow. The endoscope will be pushed down through the oesophagus into the stomach and to the beginning of the small intestine. This works best if you relax as much as possible.

During the examination, the doctor will blow air through the endoscope to expand the oesophagus, stomach and duodenum. This may cause burping. Gagging during the examination is also common. Breathing calmly can help suppress the gag reflex. The endoscope will be removed as soon as the examination is finished.

If the examination only involves looking, it will only take a few minutes. The examination will take longer if biopsies are taken or a treatment is performed. The average duration of the examination, including preparation, is 5 to 10 minutes.

After the gastroscopy

You may eat and drink anything you like after the examination.

Complaints after the examination

Your throat may feel raw and sensitive after the examination, especially if you had to burp a lot. This feeling disappears fairly quickly.

Contact us immediately if you suddenly experience severe abdominal pain, heavy bleeding or a fever (above 38 degrees) after returning home.

For complaints **within 48 hours** of your discharge, call:

- During office hours until 17:00: the outpatient clinic treating you +31 40 888 63 50
- At night and on weekends: the emergency room in Veldhoven +31 40 888 88 11

For complaints **after 48 hours** of your discharge, call:

- On workdays until 17:00: your GP
- After 17:00 and on weekends: the out-of-hours GP service

The results of the gastroscopy

Your physician (the one who requested the examination) will discuss the examination results and any further treatment with you during a follow-up appointment. The doctor who performed the examination will briefly discuss the findings with you immediately after the examination. However, the results of any tissue examination are not immediately available.

Possible complications

A gastroscopy is a safe examination method. Although rare, the following complications can occur.

Respiratory infection or pneumonia

A respiratory infection or pneumonia sometimes occurs if you have choked on stomach contents during the examination. This is more common if you are under sedation. It can also occur during emergency examinations, such as if you have a gastric haemorrhage. This can be due to having eaten before an emergency examination or due to blood from the stomach.

Damage to the oesophagus or stomach

Forceful burping during the examination can damage the lower part of the oesophagus. In rare cases, a tear can form in the oesophagus or, in rarer cases, the stomach. This can happen when there are strictures in the oesophagus. The risk of complications increases if any treatment is performed during the examination, such as stretching constrictions or injecting a blood vessel. For further explanations about the treatments, please consult your physician.

Please remember

- If you are new, register at the registration kiosk by the reception desk
- Bring identification

- If you are unable to attend your appointment, please contact the Endoscopy Department or Gastroenterology Outpatient Clinic (+31 40 888 63 70)
- Register at the registration kiosks of the Endoscopy Department

For more information, please visit mmc.nl/mdl

If you have any questions before the examination, please contact the practitioner who requested the examination for you. If you still have questions after reading this leaflet, you can call the Endoscopy Department or Gastroenterology Outpatient Clinic. You will be put through to the right person.

Sedation during the examination

If you and your doctor have decided on sedation during your examination, the following information is important. Sedation involves administering a sedative and possibly a painkiller via an intravenous cannula in your arm. Some people fall asleep during the sedation, while others remain awake but do not experience everything consciously. It is not a general anaesthetic. The aim of sedation is to make the examination as comfortable as possible, reducing anxiety, discomfort and possible pain.

Side effects and possible complications of sedation

Because the sedation may affect your breathing, heart rate, blood pressure and oxygen levels, we will monitor you closely for around one hour from the start of the examination by putting a blood pressure monitor around your arm and an oxygen monitor on your finger. If necessary, you will be given oxygen through a tube in your nose. If medication is administered through the IV line to reverse the effect of the sedative, you will have to stay in the recovery room for at least another hour.

The sedation may cause the following reactions:

- A late sleep reaction in the recovery room after the examination;
- You forget that the examination took place;
- You forget that you have been told the results;
- You may be drowsy for several hours after the examination;
- You will have a slower reaction time.

For your safety, we cannot allow you to go home alone on foot or by car, public transport, taxi, bicycle or any other mode of transport. If you have not arranged for someone to accompany you when you are discharged, the examination cannot take place under sedation. You will have to make a new appointment.

Going home after the examination with sedation

After the examination, you will be taken to the recovery room where we will monitor you until you can go home. This will be about one hour after the start of the examination. Please note that this is just an indication. Before the start of the examination, we want to know who will take you home and will make a note of that person's telephone number. We will call them when you are allowed to leave the Endoscopy Department. You are not allowed to leave on your own. It is unwise to make important decisions on the day of the examination

because of possible memory loss. Make sure you do not need to operate any dangerous machinery, do not participate independently in traffic and do not consume alcoholic drinks, as the sedation will affect your ability to react. Alcohol can increase the effect of sedation.

Please note!

- If you use a CPAP device at home, please bring it to the examination.
- If you have a pacemaker or ICD, we will inform the pacemaker technician.

Please remember to:

- bring an extra bag to store any clothes and shoes you have to take off for the examination;
- arrange for someone to accompany you during discharge and transport home.