

Colonoscopy: Information for Patients

Colonoscopy is the direct, visual examination of the inside of the large intestine, using a flexible instrument of approximately finger-thickness. Most diseases of the large intestine are directly visible using this method, and it is usually possible to inspect the end portion of the small intestine as well. If necessary, tissue samples can be taken painlessly. In many cases, so-called polyps - growths which can develop into malignant tumours - can also be removed during the examination, using an electric loop (polypectomy). This is an important advantage of this method over x-ray examination, and represents a significant contribution to the prevention of intestinal cancer.

Preparing for the examination

Your intestine must be completely free of all traces of faeces.

Please adhere strictly to the instructions on how to prepare your intestine for examination, even if you find that the salty taste of the laxative makes it difficult to drink in the prescribed quantity.

Do not take any iron preparations during the two days preceding the examination.

Your appointment

You have been referred to us by letter from your doctor, and an appointment for the examination has been arranged either through your doctor or with you direct.

When you arrive for your appointment, please go to register at the central Reception Desk of the Zuger Kantonsspital.

Do not drive yourself to the hospital. As mentioned below, you will be given a drug to make you drowsy in preparation for the examination, and so you will not be allowed to drive any vehicle for at least 24 hours after the examination.

Who will examine you?

At the Zuger Kantonsspital, you will be examined by Dr. Schmidt or his substitute and will be attended by one of our endoscopy assistants.

How is the examination carried out?

First, the doctor and the endoscopy assistant will once again go over the details of the planned examination with you and answer any remaining questions you may have. At this point at the latest, you should tell them if you are suffering from any illness, if you have had any previous endoscopic examinations, or if you have ever suffered any allergic reactions or side-effects from medications. An intravenous infusion will be set up and you will be given an injection of a short-acting drug to make you drowsy and help you to relax during the examination. Next, with you lying on your left side, the doctor will examine your anal passage with his finger, and then the flexible instrument will be inserted and carefully fed around the various curves the length of the large intestine and, if possible, into the small intestine. Your respiration and circulation will be monitored. By working steadily and carefully, the doctor and his assistant will make every effort to ensure that the examination proceeds as smoothly as possible for you. The examination normally lasts about 15 - 45 minutes, but may take longer if there are any unforeseen findings. Afterwards you will be told the results of the examination.

After the examination

Normally, patients can get up after the examination, take some refreshment in the cafeteria, and then go home. However, as you have been given a sedative drug, please remember that you are not allowed to drive any vehicle for at least 24 hours after the examination, and will not be able to concentrate fully or take any important decisions. In any case, it is a good idea to arrange for a friend or relative to accompany you home if possible. In exceptional cases, you may have to stay in hospital in order to rest or remain under observation for a few hours after the examination, but this is not usually necessary. The effects of the sedative mean that patients are not able to remember anything at all about the examination.

What are the risks?

No doctor can guarantee that any medical procedure is absolutely risk-free. The risk involved in performing a colonoscopy, however, is very small; problems arise in less than one out of every thousand cases, and are usually caused by some existing disease. In the case of surgical procedures such as polypectomy (the removal of a growth during colonoscopy, using an electric loop), there is a greater risk of complications; in such cases, the doctor will discuss the risks with you beforehand.

Possible complications that should be mentioned are: ineffectiveness of ovulation inhibitors (the contraceptive pill) as a result of the laxative-induced evacuation of the bowel; injury to, or even perforation of, the intestinal wall; bleeding; depression of respiratory function as a side-effect of sedatives or pain-killers; or a reaction in case of hypersensitivity to the medication administered. In the worst case, an emergency operation and a blood transfusion may be necessary. At the same time, it should be borne in mind that polyps which are not removed with the endoscope have to be removed by surgery in any case.

Questions

If you have any questions about either the examination itself or the risks involved, please call us and we will be happy to arrange an appointment for you to discuss them before you come for the examination. You can, of course, also put any questions to the doctor and his assistant immediately before the actual examination.

If you should experience any pain, loss of blood or other complications after the examination, please do not hesitate to call us immediately, at any time.

Patient's statement of consent

I have read and understood this information form. I have no further questions and feel that the counselling was satisfactory; therefore, after adequate time for consideration, I consent to the proposed examination.

Place / Date _____

Signature _____