

A photograph of a woman with long brown hair, wearing a white t-shirt. She is holding her right hand over her lower abdomen, suggesting discomfort or pain. The background is a plain, light color.

Colonoscopy and bowel cleansing instructions

Visual examination of the colon

A colonoscopy is a visual examination of the rectum and colon with a view to determining the presence of abnormalities in these regions.

Colonoscope

A colonoscope is a flexible tube about the size of a finger. It is fitted with a camera and connected to a TV screen. The specialist can guide the colonoscope through the rectum and colon with a view to determining the presence of abnormalities in the mucous membranes.

Using a small pincers inserted through the colonoscope, the specialist can take samples from the mucous membrane. This is painless. If the specialist finds polyps in the colon, these can also be removed via the colonoscope.

When is a colonoscopy performed?

A colonoscopy should be performed if:

- You have intestinal bleeding
- You have had abnormal stools for more than 4 weeks
- You have unexplained gastro-intestinal symptoms
- A microscopic examination has indicated that there is blood in your stools

- If an X-ray examination suggests that you may have colorectal polyps
- If you have previously had colorectal polyps removed
- If you have previously suffered from colorectal cancer

Finally, a colonoscopy is often performed in connection with screening for colorectal cancer.

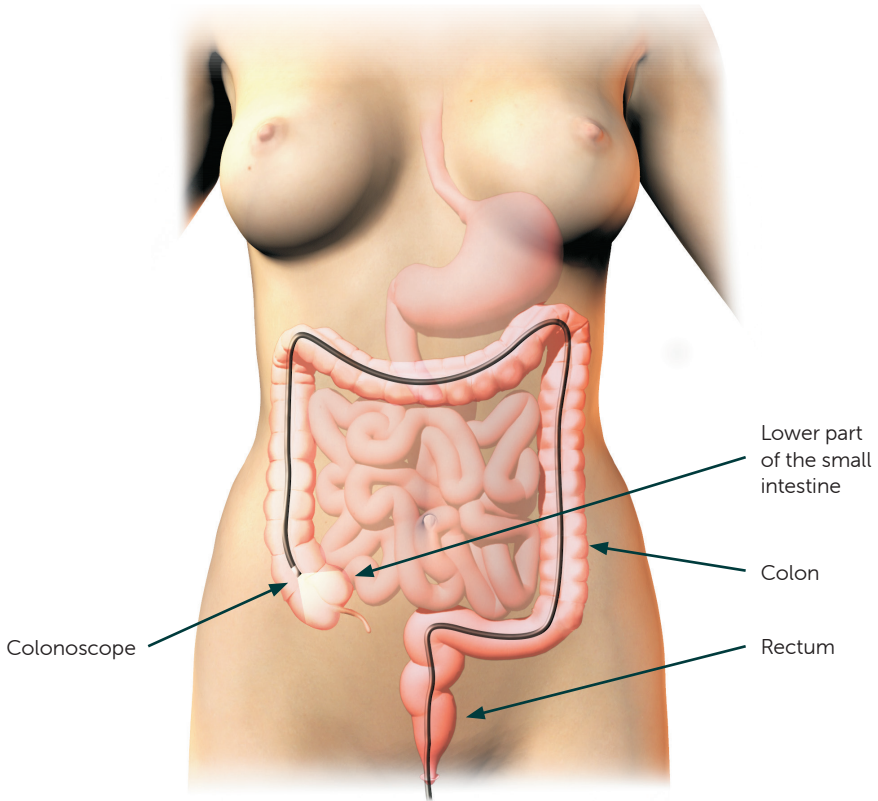
Preliminary examination

A colonoscopy is an out-patient examination, performed with or without a preliminary examination.

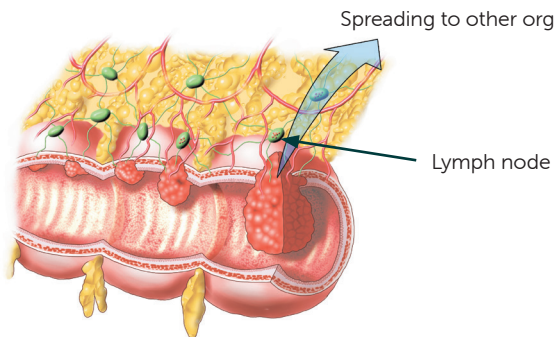
A colonoscopy can be performed:

- without painkillers
- under the influence of sedative and analgesic medication
- short-term sleeping (called NAPS. You will wake 3-5 min. after examination)
- under general anaesthetic

If the colonoscopy is performed under general anaesthetic, you will always be invited to attend a preliminary examination first.



Proliferation of colorectal cancer



Colorectal cancers usually develop from a benign adenoma (or polyp), which is a precursor of cancer (stage 0). Stage 1 is an early stage of cancer. Without treatment, the cancer will spread until it reaches stage 4, where it will have spread to lymph nodes and/or other organs, such as the liver and lungs.

Preparation

Medicine

If you are taking anticoagulants, such as Marevan, Marcoumar, Plavix® or Persantin®, please contact us immediately for advice. If you are taking diabetic medication, please contact your general practitioner for possible regulation before the examination.

Please bring a list of the medicines you take, including herbal remedies (if any).

You may not take iron supplements for 5 days before the examination.

You may continue to take any other prescribed medication as usual until 2 hours before the examination.

Bowel cleansing

The colon must be emptied completely and you must fast before the examination. See bowel cleaning instructions on pages 8-9 or 10-11.

Due to very frequent visits to the toilet, you should not count on being able to work when you start taking PicoPrep® to cleanse your bowels.

If you have reduced kidney function, please contact us as there may be a need for a different type of cleansing medication

The examination

The examination takes 15-60 minutes, depending on whether the specialist takes tissue samples or removes polyps.

You will lie on your left side during the examination.

The colonoscope is inserted into the rectum and up into the colon. The full length of the colon will be examined. If the specialist suspects that the presence of a disorder in the lower part of the small intestine, the lowest 10-15 cm of the small intestine will also be examined.

Is it painful?

The examination may be unpleasant. Some patients may briefly have some abdominal pain but this is not usually more severe than most patients can tolerate.

Air is inflated into the colon to ensure that the folds are open and that the specialist can examine the colon walls systematically. Due to the air you may feel discomfort and bloating. The specialist will release some of the air at the end of the examination and the discomfort will dissipate. You may feel bloating some hours after the examination

Sedative

In rare cases, in order to perform the examination, it may be necessary to administer a sedative.

In these cases we will insert a small catheter in to your vein, which allow us to administer the medication.

General anaesthesia

In some cases it may be AGREED TO IN ADVANCE that you sleep through the examination (general anaesthesia).

You must always follow the cleansing program in this folder (please see the back of the folder).

After the examination

The examination is an out-patient procedure and you will usually return home immediately after it.

It may be a good idea to make sure that you have someone to accompany you on your journey home from the hospital. However, if you have been given a sedative, or if the specialist has taken tissue samples or removed polyps, you will be asked to remain under observation at the hospital for about 30 minutes. If the examination was performed under general anaesthetic, you should expect to remain at the hospital for about 1 hour after the examination, until you are fully recovered.

If you have been given a sedative or anaesthetic, you must make sure that you have someone (an adult) to accompany you on your journey home. You may not drive a car, ride a motorcycle, moped or bike for the rest

of the day. Neither should you operate any dangerous tools for the rest of the day.

Food and drink

You may eat and drink normally after the examination.

Examination results

The specialist will talk to you about the results before you leave the hospital.

You will later receive a description of the examination in the mail.

If a biopsy was taken, the results will be available within 8-14 days. Before you leave the hospital, you and the specialist decide how you will receive the results of the biopsy and whether further appointments are necessary.

Potential side-effects and complications

A colonoscopy is a very safe examination, which very rarely causes complications.

If treatment is made during the colonoscopy, for example, if polyps are removed, in rare cases complications can occur in the first week after the treatment.

Possible complications are:

- Severe abdominal pain
- Bloody or black stools

- Discomfort, nausea or sweatiness
- Temperature above 38°C
- Shivering

You should contact Aleris, GP or medical emergency service if you observe any of these symptoms. In extremely rare cases (less than 1 per thousand examinations), complications may be caused by a puncture in the colon wall, which may require surgery.

Bowel cleansing instructions prior to colonoscopy

Bowel cleansing and instructions in relation to food and drink.

To ensure the successful performance and results of the examination, it is imperative that the bowel is emptied completely before the examination. Thorough bowel cleansing is therefore required.

Purchase the following from your local pharmacy: Bisacodyl (Dulcolax or Toilax) 5 mg laxative tablets and 2 x sachets of PicoPrep® (available over the counter).

PicoPrep® contains lactose. If you can not tolerate lactose or if the pharmacy does not sell PicoPrep®, please ask the pharmacist to recommend a similar cleansing product.

Frequent visits to the toilet

You are advised that the cleansing procedure will cause frequent visits to the toilet and that your stools will be very thin and watery. Many visits to the toilet during the bowel cleansing procedure can irritate the rectal opening. To soothe irritation, apply zinc cream.

5 days before the examination
You may not eat anything containing seeds ex. bread with seeds, linseed, fruit and vegetables with seeds.
You may not eat iron tablets

2 days before the examination
You may not eat dairy products
Drink 2-3 litres of fluid
Take 2 x Bisacodyl laxative tablets at 8 pm

The day before the examination	
Time	Action
Between 7 and 8 am	You may eat a light breakfast, for example, a slice of white bread with a soft-boiled egg. You may only ingest a liquid diet for the rest of the day (see figure 1)
8 am	Take 2 Bisacodyl tablets
2 pm	Drink 1 sachet of PicoPrep® dissolved in a large glass of water. Stir well (for 2-3 min). If the mixture is too warm, add ice cubes.
Between 2:30 pm and 8 pm	Drink at least 1 ½ litre of fluid.
At 8 pm	Drink 1 sachet of PicoPrep® dissolved in a large glass of water. Stir well (for 2-3 min). If the mixture is too warm, add ice cubes.
After 7 pm and until bedtime	Drink at least 1 ½ litre of fluid.

Figure 1 Liquid
<ul style="list-style-type: none"> • Water • Cordial • Fizzy drinks • Clear broth • Juice without fruit pulp • Coffee and tea • You may not ingest dairy products • Popsicle • Sorbet icecream • Juice-based protein drinks without fruit pulp <p>You should try to drink fluids containing salt (broth) and sugar (cordial and juice) during the day</p>

On the day of the examination, you may ingest a liquid until 2 hours before the examination.

You are not allowed to chew gum, pastilles or drops.
Smoking is forbidden 6 hours before the examination

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