



A guide to...

Having a Flexible Sigmoidoscopy

Patient Information

How to contact us

Booking and interpreting queries – Please call the number on your appointment letter

Clinical queries – Hemel Hempstead 01442 287968 / Watford 01923 436095

Any other query – Please call Hemel Hempstead 01442 287681 / Watford 01923 217530

This leaflet in another language, large print, Braille or audio version,
please call **01923 217 198** or email **westherts.pals@nhs.net**



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What is a Flexible Sigmoidoscopy?

A flexible sigmoidoscopy is an investigation that allows us to look directly at the lower part of your bowel. A flexible tube is passed into your back passage to inspect the lower part of your bowel. If necessary, small tissue samples (biopsies) can be taken during the examination for laboratory analysis. Polyps, which are abnormal growths of tissue from the lining of the bowel wall, can also be removed. The risks and benefits are explained on your consent form (enclosed with the appointment letter).

Preparation

Iron tablets should be stopped **five** days before your procedure.

If you are taking blood thinning tablets (Warfarin, Clopidogrel, Ticagrelor, Dabigatran, Rivaroxaban, Edoxaban or Apixaban) please continue to take these unless you have been advised otherwise by a Clinician prior to your test. Please take all other medication as you would usually.

What will happen?

When you arrive the nurse will explain the procedure and answer any questions you may have. You will be asked to sign a consent form, giving us your permission to proceed with the test. You will be asked to change into a gown and dignity shorts will be provided. You may need to have a cannula inserted into your arm to give medications.

If you have been sent an enema to use at home but have been unable to use it, bring it to the hospital, and the nurse will be able to assist you in the Endoscopy unit. In this situation please ensure you arrive for your appointment 20 minutes earlier than the stated appointment time. Not everyone will receive an enema to use at home, if you do not receive one please arrive at your stated appointment time.

In the procedure room

The nurse will ask you some safety questions. You will then be asked to position yourself on your left side. The Endoscopist will check your back passage with a gloved finger and then the Endoscope will be inserted. Throughout the procedure you may experience some abdominal cramping which is quite normal and intermittent. You may also get the sensation of wanting to go to the toilet but as your bowel is already empty, there is little risk of this happening. During the procedure, you may be asked to change your position (i.e. lay on your back).

Keeping you comfortable

Two kinds of medicines are available to keep you comfortable;

1. Entonox which is commonly known as gas and air. This light sedative gas works as a very effective pain killer for many people having a flexible sigmoidoscopy. If you chose to have Entonox, you will be encouraged to rest for a short while after the test after which time you will be safe to drive.
2. Intravenous conscious sedation can be given to you through a small IV line placed in your arm or hand. This will make you feel relaxed but not asleep. With this type of sedation, it will be necessary for you to rest in the unit afterwards. It is also essential that you arrange for a responsible person to escort you home after the test and stay with you for 24 hours. **Failure to make these arrangements may result in the investigation being cancelled.** Please note conscious sedation is not a general anaesthetic.

Are there any risks?

Rarely a small hole in the colon wall can develop (perforation) may occur. If no polyps are removed, then the risk of a complication is one in every 5000 cases. When polyps are removed the chance of these complications increases with the size of the polyp so a bleed may occur once in every 150 cases or a perforation once in every 500 cases. With endoscopic mucosal resection (large polyp removal) a bleed might occur in 1 in 20 patients and a perforation in 1 in 150. If a complication does occur, observation in hospital is necessary and surgery may be needed. It is also possible for bleeding to occur for up to two weeks after the procedure. Although a flexible sigmoidoscopy is a very sensitive test, no procedure is 100% accurate and there is a small chance that abnormalities can be missed. If you are worried about any of these risks, please speak to your doctor or a member of the team before you are due to have this procedure.

It is recommended that you do not travel abroad within two weeks of your procedure for safety reasons. This could invalidate your travel insurance. Please call us if you would like to discuss.

When will I get the results of the procedure?

You will be given a copy of the report before you leave the department and the doctor or nurse will talk to you at the end of the procedure to explain their findings. If you have had samples sent to the laboratory the results will be reviewed by the Endoscopist and you will be contacted if there is anything of concern.