

# Colonoscopy and Flexible Sigmoidoscopy

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## What are colonoscopy and flexible sigmoidoscopy?

These are examinations of the anus, rectum and colon by a flexible telescope inserted through the anus.

## When are these tests performed?

The surgeon requesting the test wants to look at the inside of your bowel. This is commonly to investigate a change in your bowel habit or to find a cause for bleeding from the bottom. It is a standard test for patients with incontinence or obstructed defaecation to rule out rare diseases such as bowel inflammation.

## What is the difference between colonoscopy and flexible sigmoidoscopy?

Colonoscopy looks at the lining of the large bowel (anus, rectum, colon) and may also look into some of the small bowel. By contrast, flexible sigmoidoscopy looks at the anus, rectum and left side of the colon. The tests require different preparation and sedation (see below).

## Is there any special preparation?

Colonoscopy requires the large bowel to be clear of stool. The patient must take medicine to clear the bowel out, starting the day before the colonoscopy. The medicine (complete with instructions on when to take it, what to eat and what to drink) will be sent out with your appointment for the test (see figure 1). If you develop severe abdominal pain or vomiting with this, you should stop taking the medicine and contact the endoscopy department.

Flexible sigmoidoscopy simply requires the patient to have an enema (medicine squirted into the anus/rectum). This is usually given by a nurse in the endoscopy unit just before the test.

## Will I be asleep for the test?

Colonoscopy can only be undertaken with sedation. This is given intravenously into a drip inserted into your arm just before the test. Patients may sleep through the test with no recollection afterwards. Other patients remember the test but the sedation acts to reduce anxiety.

Flexible sigmoidoscopy can either be done with sedation (as for colonoscopy) or with you awake. You should discuss the options with your endoscopist.

## Are the tests embarrassing or painful?

These are common tests performed in a private environment. Whilst patients may experience some discomfort, the tests themselves are rarely painful.

## What are the risks?

The important but rare risk is that of perforation (inadvertently making a hole in the bowel). This is usually obvious immediately. Patients with a perforation need to be admitted to hospital and may require surgery to fix the hole. The risk is around 1:1000 for colonoscopy and 1:5000 for flexible sigmoidoscopy.

## What is the recovery like after the tests?

After sedation, you will need to wake up fully before being allowed to leave the endoscopy department. This may take one to two hours. You cannot drive home afterwards or indeed for 24 hours.

## What happens then?

You will often be given a copy of the endoscopy report to take home. The nurses and your endoscopist may discuss any findings with you before you leave. You will often receive a clinic appointment to come back and see the surgeon who referred you.

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<b>How to prepare and take moviprep</b>	Add one sachet A and one sachet B into a jug. Add one litre of water, stirring until the powder is dissolved. Take one glassful every 15 minutes until you have drunk it all. You should also take another 500ml of clear fluid with each litre of moviprep.
<b>If you colonoscopy is in the morning</b>	<b>On the day before your test</b> , do not eat anything after 9am. After this time, restrict yourself to clear fluids only (water, black tea, black coffee, clear fruit juice or squash). At 5pm take the first litre of moviprep as above (with an extra 500ml clear fluid). At 8pm take the second litre of moviprep (with an extra 500ml clear fluid). <b>On the day of your test</b> , do not eat anything.
<b>If your colonoscopy is in the afternoon</b>	<b>On the day before your test</b> have a light meal 1-2 hours before starting moviprep, then restrict yourself to clear fluids only (water, black tea, black coffee, clear fruit juice or squash). At 7pm take the first litre of moviprep as above (with an extra 500ml clear fluid). <b>On the day of your test</b> at 6am take the second litre of moviprep (with an extra 500ml clear fluid).

Figure 1: Schedule for bowel preparation (moviprep) for colonoscopy.

<b>DO s</b>	<b>DON'T s</b>
<p><b>Do</b> drink lots of clear fluid after starting the bowel preparation until two hours before the test.</p> <p><b>Do</b> ensure that you have reasonable access to a toilet after starting the bowel preparation.</p> <p><b>Do</b> take your usual medications, though you should stop taking iron one week before the test, bulking and constipating agents four days before the test.</p> <p><b>Do</b> contact the endoscopy department at least a week in advance if you take diabetic medication (injections or tablets) or warfarin for advice.</p> <p><b>Do</b> contact the endoscopy department if you develop pain and vomiting with the bowel preparation.</p>	<p><b>Don't</b> eat after starting the bowel preparation.</p> <p><b>Don't</b> drink anything less than two hours before the test.</p> <p><b>Don't</b> drive yourself home (or for 24hours) or take public transport if you have had sedation.</p> <p><b>Don't</b> sign important documents for 24 hours if you have had sedation.</p> <p><b>Don't</b> be at home alone on the night following the test. Make arrangements to stay with a friend or for them to stay with you.</p>

**If you feel unwell, have significant bleeding or abdominal pain after the procedure and cannot get hold of your GP or the hospital, then you should go to your local Accident and Emergency Department**

**Manor Hospital (01865) 307777      Foscote Hospital (01295) 252281**

Figure 2: General advice for colonoscopy and flexible sigmoidoscopy.

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