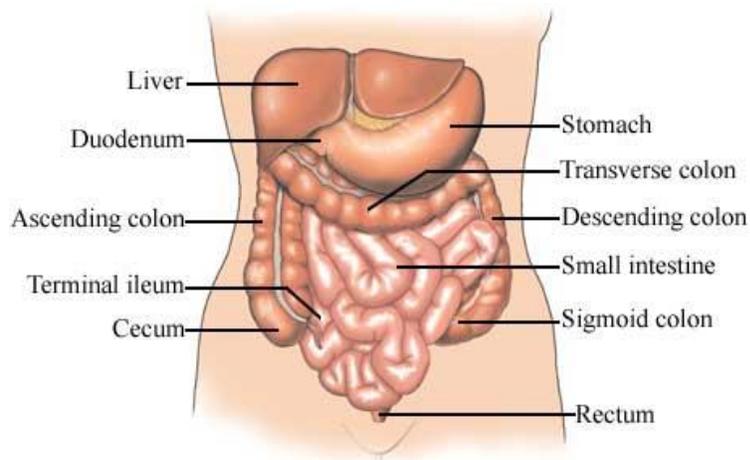


South Shore Endoscopy Center

WHAT IS A COLONOSCOPY?

A colonoscopy is a procedure that enables your physician to examine the lining of the colon (large intestine) for abnormalities. A lighted, flexible tube about the thickness of a finger is inserted into the anus by the physician, advancing it slowly into the rectum and colon under direct vision throughout the colon.



WHAT CAN BE EXPECTED DURING A COLONOSCOPY?

A colonoscopy is usually well-tolerated and rarely causes much pain. There is often a feeling of pressure, bloating, or cramping at times during the procedure. Your doctor may give you medication through a vein to help you relax and better tolerate any discomfort from the procedure. You will be lying on your side or on your back while the colonoscope is advanced slowly through the large intestine. As the colonoscope is withdrawn, the lining is again carefully examined. The procedure usually takes 15 to 60 minutes. In some cases, the passage of the colonoscope through the entire colon to its junction with the small intestine cannot be achieved. The physician will decide if the limited examination is sufficient or if other examinations are necessary.

WHAT IF THE COLONOSCOPY SHOWS SOMETHING ABNORMAL?

If your doctor determines that an area of the bowels needs to be evaluated in greater detail, a forceps instrument is passed through the colonoscope to obtain a biopsy (a sample of the colon lining). The specimen is submitted to the pathology laboratory for analysis. If a colonoscopy is being performed to identify the source of bleeding, the area of bleeding may be controlled through the colonoscope by injected certain medications, or by coagulation (sealing off bleeding vessels with heat treatment). If polyps are found, they are generally removed. None of these additional procedures typically produce pain. Biopsies are taken for many reasons, and it does not mean that cancer is necessarily suspected.

WHAT ARE POLYPS, AND WHY ARE THEY REMOVED?

Polyps are abnormal growths from the lining of the colon that vary in size from a tiny dot to several inches. The majority of polyps are benign (non-cancerous) but the doctor cannot always tell a benign polyp from a malignant (cancerous) one by its outer appearance alone. For this reason, removed polyps are sent for tissue analysis. Removal of the colon polyps is an important means of preventing colorectal cancer.

HOW ARE POLYPS REMOVED?

Tiny polyps may be totally destroyed by fulguration (burning) but larger polyps are removed by a technique called snare polypectomy. The doctor passes a wire loop (snare) through the colonoscope and severs the attachment of the polyp from the intestinal wall by means of an electrical current. You should feel no pain during a polypectomy. There is a small risk that removing a polyp will cause bleeding or result in a burn to the wall of the colon, which would require surgery.

WHAT HAPPENS AFTER A COLONOSCOPY?

After a colonoscopy, your physician will explain the result to you. If sedation has been administered during the procedure, someone must drive and accompany you home. You may feel alert after the procedure, but your judgment and reflexes may be impaired for the remainder of the day, making it unsafe to drive or operate any machinery. You should also not plan to work or schedule other meetings or appointments on the day of your procedure.

You may experience some cramping or bloating because of the air introduced into the colon during the examination. This should discontinue promptly with the passage of gas. Generally you should be able to eat after leaving the colonoscopy, but your doctor may restrict your diet and activities, especially after a polypectomy.

WHAT ARE THE POSSIBLE COMPLICATIONS OF A COLONOSCOPY?

Colonoscopies and polypectomies are generally safe when performed by physicians who have been trained and are experienced in these endoscopic procedures.

One possible complication is a perforation or tear through the bowel wall that could require surgery. Bleeding may occur from the site of biopsy or polypectomy. It is usually minor and stops on its own or can be controlled through the colonoscope. Rarely blood transfusions or surgery may be required. Other potential risks include a reaction to the sedatives used, as well as complications from heart and lung disease. Localized irritation of the vein where medications were injected may rarely cause a tender lump lasting for several weeks; this will eventually go away. Applying hot packs or warm, moist towels may help relieve any discomfort.

Although complications after a colonoscopy are uncommon, it is important for you to recognize early signs of any possible complications. ***Contact your physician who performed the procedure if you notice any of the following symptoms: severe abdominal pain, fever, chills, or rectal bleeding more than ½ a cup.*** Bleeding can occur several days after polypectomy.