Flexible Sigmoidoscopy
Endoscopy Department

We can provide interpreters for a variety of languages, information in larger print or other formats (e.g. audio) - please call us on 01932 723553.
To use the Text Relay service, prefix all numbers with 18001.

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Flexible Sigmoidoscopy

You have been advised to have a flexible sigmoidoscopy, which is a test to examine part of your colon (large bowel) using a medical camera.

Why do I need a flexible sigmoidoscopy?

You may be experiencing fresh bleeding from your back passage, a change in your normal bowel habit and/or abdominal pain, which needs to be investigated. The most common cause for rectal bleeding is haemorrhoids (piles) and diverticular disease (small pockets that are created in the lining of the colon).

The diagnosis may be haemorrhoids (piles), which can sometimes be treated by giving an injection directly into them or by placing small rubber bands around them during the flexible sigmoidoscopy. If the diagnosis is diverticular disease (small pockets that are created in the lining of the colon) we will advise you on a diet which will help the condition.

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Advice and Liaison Service (PALS) on 01932 723553 or email pals@asph.nhs.uk. If you still remain concerned please contact our Complaints Manager on 01932 722612 or email complaints@asph.nhs.uk

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Additional information may be obtained by logging on to websites of the following useful organisations:

**British Society of Gastroenterology** - [www.bsg.org.uk](http://www.bsg.org.uk)

**The National Association for Colitis and Crohn's Disease (NACC)** - 01727 844 296 - [www.nacc.org.uk](http://www.nacc.org.uk)

**Patient Care Society for Gastroenterology** - 01865 226 757 - [www.pcsg.org.uk](http://www.pcsg.org.uk)

**Digestive Disorders Foundation** - PO Box 251, Edgeware, Middlesex, HA8 6HG (send SAE) - [www.corecharity.org.uk](http://www.corecharity.org.uk)

**Royal College of Radiologists** - [www.rcr.ac.uk](http://www.rcr.ac.uk)

**The University of Edinburgh** - [www.glenlivet.mph.ed.ac.uk/endo.general/sigmoidoscopy](http://www.glenlivet.mph.ed.ac.uk/endo.general/sigmoidoscopy)

A flexible sigmoidoscopy is carried out if we suspect that you may have inflammation of the bowel, which could be due to either Crohn's disease or colitis. If this is the case these condition can be treated with medicines and diet, but an operation could be necessary. You may need to have a colonoscopy, on another day, (this is carried out with a camera which is able to look further) to check the remaining colon.

This procedure is sometimes carried out to see if you have polyps (innocent growths), which can be removed by using an electric current to burn them away. The burnt away polyps will be sent to the laboratory for testing. If polyps are found, you will need to have a colonoscopy to check the remaining colon.

Sometimes a flexible sigmoidoscopy is carried out to see if you have a tumour. If a tumour is found you will need to have a colonoscopy or barium enema (an x-ray of the bowel) to check the remaining colon, following which you may need to have an operation. Colon tumours are curable if caught early.

To confirm or to exclude Crohn's disease, colitis and tumours we will take biopsies (tiny samples of the lining of the colon). These will be sent to the laboratory for testing. Photographs may be taken of the inside of your colon, which will then be filed with the sigmoidoscopy report in your medical notes. Whatever the findings, the flexible sigmoidoscopy will allow for an accurate diagnosis to be made and help us to provide treatment that will be suitable for you.
Who will carry out the flexible sigmoidoscopy?
An experienced health care professional who has been trained to carry out flexible sigmoidoscopy will normally carry out the test. This may be a doctor or a nurse. If a trainee carries out the procedure they will be supervised at all time by an experienced doctor or nurse.

The name of the Consultant/Nurse Practitioner who will have overall responsibility for your test is:
Dr/Mr/Mrs ..............................................
Consultant Surgeon/Gastroenterologist/Nurse Practitioner

Can diagnosis be made any other way?
Flexible sigmoidoscopy is the simplest, but most accurate, first line test carried out to diagnose conditions of the left colon, especially if you have experienced fresh rectal bleeding.

What would it mean if I did not have the flexible sigmoidoscopy?
If you did not have the flexible sigmoidoscopy, your condition would not be accurately diagnosed and, without the right treatment, could get worse.

How will the flexible sigmoidoscopy be carried out?
You will come into hospital for half a day. You will be asked to wear a hospital gown and to remove the lower half of your own

What are the benefits of having flexible sigmoidoscopy?
The benefits are, that we can see your rectum and sigmoid and take biopsies (tissue) of any areas that are inflamed. We can also take out any polyps that we see. We send these specimens to the labs to be looked at under a microscope. This can help with diagnosis and treatment.

Are there any alternatives to this procedure?
Other screening methods can visualise your bowel equally well, a barium enema for example, but there is no other way to take tissue if required.

Further information

St Peter's Hospital patients – For appointments and general enquiries, call the Endoscopy Booking Office on 01932 722037 or 01932 723851. For medical or post-operative enquiries, call the Endoscopy nurses on 01932 722747. These phones will be answered from Monday to Friday between the hours of 09.00 and 17.00. If you need to call at the weekend, please use 01932 722350.

At the current time, we do not carry out any Endoscopy procedures at Ashford Hospital.
Can I seek a second opinion?
Yes, if you are not happy with the results, treatment or advice, you have the right to seek a second opinion and your Doctor can advise you on that.

TO ALLOW US TO PREVENT ANY FORESEEABLE COMPLICATIONS WE WILL WANT TO KNOW -

- What medications you are currently taking. If you take Warfarin, or other medicines that thin your blood, you **MUST** contact the Anti-Coagulant clinic or your GP at **least one week** before your appointment date, as it may be necessary for you to stop taking these before your flexible sigmoidoscopy. Please also let the Endoscopy Unit know.

- If you are on iron, **you should come off it**, 7 days before your test.

- You should tell us about allergies that you may have to medicines/plasters/latex. We will avoid using anything to which we know you are allergic.

If you know you have an allergy to latex, you should inform us **at least a week** before the date of your appointment, so that we can make the necessary arrangements. Unless otherwise stated, the required information will be taken from you on the day of your appointment. If you are an inpatient, the ward nurses will forward this information to the Endoscopy Unit.

clothing, but you can wear socks if you suffer from cold feet. We ask you to remove any jewellery that you may be wearing (it is advisable for jewellery to be left at home) but we will cover your wedding band with tape.

The flexible sigmoidoscopy will be carried out in a private room in our Endoscopy Unit.

An experienced nurse will be with you at all times.

You will lie on your left hand side. By placing a small peg on your finger, your pulse rate and body oxygen levels are constantly displayed and observed on a screen.

When you are comfortable the test will begin.

The procedure will take between 5-15 minutes to complete.

Will the flexible sigmoidoscopy be painful?
The test is usually well tolerated but may be uncomfortable rather than painful.

Intravenous (i.v.) sedation is **not** normally given during this procedure. Entonox / laughing gas may be given if requested. This does not effect driving.

What preparation do I have to make?
You will need to have an enema at home an hour before you leave to come to the hospital for the flexible sigmoidoscopy. Please read our separate letter about how to obtain and administer your home enema. Call the Endoscopy Unit if this is
not clear. It is advisable to buy the enema a day or two before you need it.

Take all your medication as normal. **If you are on WARFARIN or IRON please see the instructions at the end of this book.**

**Are there any risks / complications?**
Before the test, a trained nurse will go through a check sheet with you to highlight any health issues of which we need to take particular care.

During the procedure, we will need to put air inside you to enable us to see the colon. It is this air that makes you feel uncomfortable and we will remove most of it as we withdraw the camera.

Flexible sigmoidoscopy also carries a very rare risk of a small tear/bleed occurring in the left side of your colon.

**What will I experience if a tear occurs?**
If you experience any severe abdominal pain and/or vomiting after your flexible sigmoidoscopy, it may mean that a tear has occurred. The nurses looking after you would ask a doctor to see you, who would prescribe a painkiller for you and arrange for blood tests and x-rays to be carried out.

If these tests and x-rays show that a tear has occurred we would arrange for you to stay in hospital to have the right treatment, which may mean an operation.

The chances of this happening to you are 1 in 1,000 with a slight increase if you have a polyp removed.

This complication rate is based on the national average, and at Ashford and St Peter’s Hospitals, the rate of occurrence of this is well within the figure.

**What will happen after the flexible sigmoidoscopy?**
After the flexible sigmoidoscopy, you will be given a cup of tea and time to fully recover.

You will be discharged home when the nurses looking after you feel that you are well enough to go.

**When will the results be available?**
We will be able to tell you what was seen before you leave the Endoscopy Unit. However, if samples have been sent to the laboratory, the results will not be available straight away but will be forwarded to you a week or so later.

Your referring doctor /GP will get a copy of your flexible sigmoidoscopy report.

Written information will be given to you to take home with you regarding what was seen and done during the flexible sigmoidoscopy and you will be given directions on what to do next.