

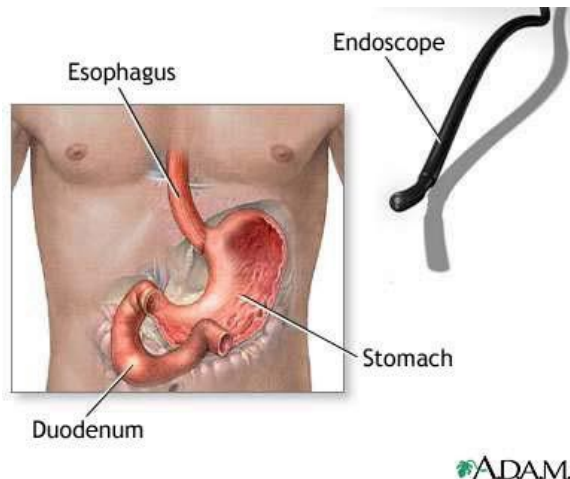


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What Is a Gastroscope (EGD)?



A gastroscope, also called a panendoscopy, an EGD (esophagoduodenoscopy), or an upper endoscopy, is a test used to examine the upper gastrointestinal tract including the esophagus, the stomach, and the duodenum or first part of the small bowel.

A gastroscope is a flexible tube that has a light and a very small video camera on the end that is used to perform the exam. The tube is smaller than the diameter of a finger and can be easily passed through the mouth and gently steered through the upper digestive tract. Special instruments can be passed through the scope to remove polyps or take biopsies (small tissue samples) of the lining.

Why are gastroscopies performed?

Gastroscopies are used to investigate diseases and symptoms of the upper GI tract. A gastroscopy may be recommended for the following symptoms:

- abdominal pain
- nausea
- vomiting
- difficult or painful swallowing
- positive hemoccult, or hidden blood in the stool
- anemia and GI bleeding (black or tarry stools)
- abnormal x-rays or scans of the upper GI tract

Occasionally there are other disorders of the stomach that require tissue samples or biopsies to confirm a diagnosis. Tissue samples of polyps or ulcers will distinguish between cancerous and non-cancerous lesions. Besides looking for cancer biopsies can confirm or diagnose many other GI problems.

Helicobacter pylori infection and celiac sprue disease are common concerns that may be diagnosed with biopsies.



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What is the preparation for gastroscopy?

The preparation for an EGD is relatively simple. Most physicians will advise you not to eat any solid food after midnight and clear liquids up until 4-6 hours before the procedure. Your appointment scheduler will provide written instructions with exact times for fasting.

Fasting is very important for two reasons. First, the exam is only as good as the preparation. The stomach needs to be empty in order for the physician to provide the best possible examination. Second and most importantly is patient safety. Because the exam requires sedation or anesthesia is imperative that the stomach be empty.

Can I take my current medications?

Most medications can and should be continued as usual. Heart, blood pressure, breathing medications and others should be continued. It is very important that you tell your physician about all the medications, supplements and herbal treatments you use. The physician will advise you about which medications to continue or not.

What happens during the gastroscopy?

When you arrive, a nurse will help you to change your clothing and prepare you for the procedure. After completing the necessary paperwork for admission the nurse will start an IV. Once ready you will be transported to the procedure room.

In the procedure room the nurse and technician will assist you in lying on your side. Gastroscopy is a painless and well-tolerated examination. Through the IV a CRNA initiates the sedation or anesthesia. When you are drowsy and comfortable the doctor will insert the scope and slowly advance it to the back of your mouth and ask you to swallow. After the scope is passed through the throat, your doctor will examine the lining guiding the gastroscope through the upper digestive track. Air is introduced to open the stomach and bowel that collapse when empty. The procedure itself usually takes 15 to 25 minutes, although you should plan to be at the facility for at least 2-3 hours for preparation, the test itself and recovery time.

What if the gastroscopy shows something abnormal?

Occasionally the doctor may see erythma (redness), ulcers, nodules, tumors or polyps that should be sampled or removed for further investigation. If your doctor notices anything abnormal it may be biopsied or removed during the procedure. A biopsy forceps or snare can be introduced through the scope to perform a biopsy or polyp removal. This causes no pain to the patient, as there are no nerve endings in the lining. Any tissue removed is sent to the laboratory for testing.



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What happens after a gastroscopy?

After your gastroscopy there is a short recovery period at the facility. The physician will give you the results of the procedure. Results of biopsies taken or polyps that were removed will take a few days to receive.

You will need to have a companion drive you home after the exam. Because of the sedation or anesthesia you will not be allowed to drive, return to work, use any power tools and you should not sign legal documents for 24 hours following the procedure. Some patients may have some amnesia, feel dizzy or tired after the exam. Occasionally a patient may feel bloated and belch air. It is best to return home and plan for a quiet afternoon & evening. Most importantly, you can eat after returning home from the exam. At first you should have a small meal and increase your diet as tolerated.

What are the possible complications of gastroscopy?

Gastroscopy is usually a safe procedure. However like any procedure there can be some risk. The complications associated with gastroscopy are:

- Perforation: A tear or hole in the upper GI wall that could require surgery to repair.
- Bleeding at the site of a polyp removal or biopsy that could stop on its own or need extra treatment.
- Missed lesions: AN EGD is currently the best exam available to examine the upper GI system; however, no diagnostic exam is 100% accurate. Occasionally, polyps, cancers or other abnormalities may not be detected. It is very important to report any symptoms or problems and to follow up as planned with the physician. The EGD procedure will not eliminate your risk of cancer or disease.
- Other risks that are possible are sore throat, infection, heart stoppage and under very unusual circumstances death.
- Possible damage to permanent teeth or dental appliances or implants.
- There may also be certain risks and complications that are completely unforeseen and unpredictable therefore this list cannot be considered inclusive or complete.