

Gastroscopy

What is an Upper Gastrointestinal Endoscopy?

Endoscopy involves the use of a flexible video instrument to examine the upper intestinal tract including the oesophagus, stomach and duodenum. The procedure is commonly undertaken if your doctor suspects that you have inflammation, ulceration or other abnormality of the oesophagus, stomach or duodenum.

How are you prepared?

You should not smoke or have solid food for 8 hours, but clear fluids are allowed up to 4 hours before your procedure – after this you should be "NIL BY MOUTH" (nothing at all to eat or drink). At the beginning of the procedure your throat may be sprayed with a local anaesthetic and you will be given a sedative by injection into a vein to make you more comfortable. The procedure will take between 10-15 minutes and you will be sleeping for approximately 30 minutes afterwards.

What do we do?

An endoscope is a flexible tube about 9mm in diameter. It allows full colour inspection of the oesophagus, stomach and duodenum. It also allows biopsies to be taken from the stomach, small bowel and other areas.

Special considerations

If you have serious heart or chest problems, special precautions need to be taken to reduce any possible risks. You should therefore inform your doctor of any serious illness of any nature. The precautions taken will usually include providing oxygen during the procedure and/or monitoring the heart and oxygen levels during the procedure.

Safety and risks

Gastrointestinal endoscopy is usually simple and safe. It is unlikely to cause problems but on rare occasions, patients may have a reaction to the sedation or damage to the oesophagus, including perforation at the time of examination. Bleeding is a rare complication following upper endoscopy and biopsy. Damage to loose, decayed teeth or dental bridges rarely occur. Full details of all possible rare complications can be discussed with your doctor before the procedure.