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What is a gastroscopy?

Gastroscopy is a procedure where the doctor inserts a flexible instrument called a gastroscope through the mouth allowing direct inspection of the oesophagus (gullet), stomach and duodenum (upper small bowel).

How are you prepared?

For safety and to get the best view your stomach needs to be empty. **You should have nothing solid to eat in the six hours leading up to your arrival time, but you may continue 'clear fluids' until two hours prior to arrival.** After that you must remain FASTED apart from a sip of water with any important regular medicines. (please disregard if having a Colonoscopy). Refer to our bowel preparation instructions.

Special considerations

People with diabetes, heart-valve disease or on blood thinners (other than aspirin) may require special arrangements which should be discussed with Dr Brown.

What happens on the day of the procedure?

- Come to the Endoscopy Unit at the time you are told. Don't bring any valuables.
- You will be admitted by a nurse.
- Once in the examination room you can have a sedative injection to help make you comfortable, however some discomfort may be experienced. Spray to numb the throat may also be used.
- The time taken to complete the procedure varies, but is generally around 5-10 minutes.
- Depending on the findings, biopsies (samples) may need to be taken, or polyps (small growths of the stomach lining) removed.

What happens after the gastroscopy?

- After the procedure you will be taken to the Recovery Area until any sedation wears off – you may have some bloating and discomfort from the air inserted during the procedure, which will pass.
- After something to eat and drink you will be able to go home – you may not drive yourself, sign legal documents, or drink alcohol that day.
An adult needs to take you home and stay with you.
- You will be given discharge instructions, and if necessary a follow-up appointment will be made.

Safety and risks

- The instruments are completely cleaned between each patient so there is almost no risk of transmission of infectious diseases.
- The most common complications of gastroscopy are mild throat soreness, abdominal bloating and discomfort after the procedure.
- More serious complications are very rare and include: puncture (perforation) of or bleeding from the stomach or oesophagus, reactions to the sedative injection or chipped teeth. These problems may require urgent treatment such as blood transfusion or even operation.
- While gastroscopy is the most accurate means of assessing the upper gastro -intestinal tract, it is possible to miss small but important lesions.
- You may not be aware of complications until a few days after the procedure. Any bleeding or severe pain should be reported to a doctor promptly.
- Like all invasive medical procedures, there is a remote chance that complications can result in death - *this is extremely rare*.

In an emergency, page Dr Brown on 9387 1000

HEAD OF ENDOSCOPY - THE ALFRED HOSPITAL

ALSO AT JOLIMONT ENDOSCOPY, EPWORTH AND THE AVENUE