



**Northumbria Healthcare**  
NHS Foundation Trust

# Your guide to having a Sigmoidoscopy

Issued by the Endoscopy Team

## **Introduction**

This leaflet explains why you have been referred for a sigmoidoscopy. It tells you about the purpose, risks and benefits of the procedure. These will already have been discussed with you before you agreed to have the sigmoidoscopy. The leaflet also describes what you can expect when you come for the test.

## **Purpose of the treatment/procedure or investigation**

This examination is used to investigate problems such as diarrhoea, pain, weight loss or bleeding. The test results will be used to guide your further treatment.

## **What is a flexible sigmoidoscopy?**

A flexible sigmoidoscopy is an examination of the left side of your large bowel.

## **Benefits of a flexible sigmoidoscopy**

A sigmoidoscope is used to do this examination. This is a flexible tube, approximately the thickness of your middle finger, that is passed through your back passage (anus) and up the left side of your large bowel.

The doctor or nurse endoscopist doing the procedure will be able to look for, and possibly treat, any abnormalities that may be present, such as polyps. A polyp is an abnormal projection of tissue, rather like a wart, which the doctor will want to examine in more detail.

If necessary small tissue samples called biopsies can be taken during this test for examination in the laboratory. This will not be painful.

## Are there any risks in having a flexible sigmoidoscopy?

Like all clinical procedures there are a small number of risks. Flexible sigmoidoscopy can result in perforation of the bowel wall or bleeding. This is extremely rare and occurs in less than 1 in 2000 examinations, but patients may need urgent surgery when it happens.

With all clinical procedures there is a very small risk of death if a complication does occur, but this is extremely rare (less than 1 in 10,000 endoscopies).

## Do I need to do anything before my appointment?

It is important to make sure that your bowel is empty so that the doctor or nurse can get a clear view on the inside of your bowel. The detailed instructions on how to prepare for this test, including dietary instructions, are enclosed with this leaflet.

## Worried about having a flexible sigmoidoscopy?

It is natural to feel worried about having this test, many people do. If you are particularly worried, please ring the number given in your appointment letter and hopefully, we will be able to put your mind at rest.

## What about my tablets?

### Please bring with you:

A list of your tablets

- Any inhalers or sprays you use
- If you take any of the tablets listed below, please follow these instructions:

**Iron Tablets (ferrous sulphate)** - Stop taking iron tablets one week before your test – this is extremely important.

**Warfarin, Phenindione, Acenocoumarol** - If you are on these tablets you should continue to take your tablets. Please bring in your yellow anticoagulation record book and we will check your INR on arrival.

**Rivaroxaban, Dabigatran, Apixaban** - These anticoagulants normally need to be stopped prior to your procedure. If you are taking any of these tablets or any other anticoagulant (blood thinning) medication, it is important that you contact the Endoscopy Unit for further instructions.

**Clopidogrel/Prasugrel** are safe to take as normal.

**Aspirin and Dipyridamole** are safe to take as normal.

Tablets for all other conditions such as angina, asthma and epilepsy should be taken as normal. If you are on an oral contraceptive pill, please take your pill as normal.

## **What if I am being treated for diabetes?**

If you are being treated for diabetes, you should continue to take your diet and treatment as normal.

## **What happens when I come for my test?**

Your appointment letter will tell you where to come. You will be met by a member of staff who will show you where to wait. A nurse will ask you some questions about your general health.

The doctor or nurse who is doing the test (the endoscopist) will then talk to you. They will explain what will happen and give you the opportunity to ask questions. At this point you will be asked to read and sign a form that gives your consent to the test. It is very important that you understand what the test involves before signing the form. If you have any questions please do ask.

You may be asked if medical students can watch your sigmoidoscopy. This is requested on a voluntary basis.

Before your sigmoidoscopy starts you may be asked to change into a hospital gown.

## **What happens during the test?**

You will lie comfortably on your left side on a couch. The doctor or nurse will perform a brief internal examination before inserting the tube into your back passage. The tube is then passed around the bends in your bowel.

During the test air will be put into your bowel. This will expand the lining slightly to provide a clear view of the inside of your bowel. You may have some discomfort and cramps caused by pressure from the air. This test can take anything between 5 and 20 minutes. A nurse will stay with you throughout the test.

## **Will it be painful? What if I want to pass wind?**

Patients' experience of this test is very variable. Many patients cope well with the test. However, some do experience windy pains and a bloating feeling due to the air that is put into the bowel. You may get the sensation of needing to go to the toilet but this is usually due to wind. We understand that you may feel embarrassed but if you do feel the need to pass wind, for your own comfort, do let the air escape.

We try to minimise the discomfort you experience. You may be offered Entonox. This is a gas you inhale to make you feel more comfortable, also known as 'gas and air'. If the discomfort becomes too much please tell the nurse and we can stop the test.

## **What happens after the test?**

You will be shown into a waiting area and offered a hot drink. You may still have air in your bowel so a toilet is available for you to use before you leave.

The doctor or nurse endoscopist will talk to you before you go home and give you the initial results. If you had a biopsy taken the results will be available 3-4 weeks after the test and will be sent to the doctor who referred you for the examination.

A nurse will talk to you about any follow-up appointment and explain how and when you will get the results.

You will be able to go home 10-20 minutes after the test is finished. You can eat and drink as normal when you get home.

## **Alternatives / options for treatment**

A sigmoidoscopy allows the doctor or nurse endoscopist to look at the left side of the large bowel. The majority of patients will not need any further investigations.

Depending on your exact symptoms, your age and what we find out from this examination, you may be advised to have a further test.

This could be a barium enema or another telescopic examination, called a colonoscopy. A colonoscopy is similar to a sigmoidoscopy, but uses a longer tube to examine all of the large bowel.

If you have any doubts about which test is best for you, please talk to the doctor who referred you for this examination before your appointment date.

## **How will I feel when I get home?**

You may have some discomfort for several hours due to wind in your bowel. It may help to have warm drinks and keep walking around.

If you have a biopsy you may pass a small amount of blood. This should be less than a tablespoonful.

If you are concerned about the amount of blood you pass or your pain gets worse and is not relieved by mild painkillers, you should seek help. You will be given information when you go home that tells you who to contact.

## Contact us

If you have any queries please contact us:

**North Tyneside General Hospital**      **0191 349 9672**

Monday to Saturday, 8am - 6pm

**Wansbeck General Hospital**      **01670 529 063**

Monday to Friday, 8am - 6pm

**Hexham General Hospital**      **01434 655 321**

Monday to Friday, 8am - 6pm

**Alnwick Infirmary**      **01665 626 794**

Monday to Friday, 8am - 6pm

**Berwick Infirmary**      **01289 356 635**

Please note this unit is not open daily,  
if there is no response please contact  
Alnwick Infirmary.

If you need urgent care outside of these hours call 111 or go to:

- your local 24 hour walk-in service at Hexham, North Tyneside or Wansbeck
- your local minor injuries unit if you live in Alnwick, Berwick, Blyth or Haltwhistle

If you need emergency care dial 999 or go to the Northumbria Specialist Emergency Care Hospital, Northumbria Way, Cramlington, NE23 6NZ.

## **Alternative Formats**

If you would like a copy of this information in large print, another language, audio tape or other format please call the Contact Centre on **03 44 811 8118**

## **Other sources of information**

### **NHS 111**

### **NHS Choices**

[www.nhs.uk/pages/homepage.aspx](http://www.nhs.uk/pages/homepage.aspx)

### **NICE (National Institute for Health and Clinical Excellence)**

[www.nice.org.uk](http://www.nice.org.uk)

### **Patient Advice and Liaison Service (PALS)**

Freephone: **0800 032 0202**

Text: 01670 511098

Email: [northoftynepals@nhct.nhs.uk](mailto:northoftynepals@nhct.nhs.uk)

### **Northumbria Healthcare NHS Foundation Trust**

General Enquiries **03 44 811 8111**

[www.northumbria.nhs.uk](http://www.northumbria.nhs.uk)

PIN 075/V6

Review date: October 2021

© This material is the copyright of the Northumbria Healthcare NHS Foundation Trust