

## Patient information

### **Inpatient Small Bowel Enteroscopy**

#### Digestive Disease Care Group

You have been advised by your doctor to have a Small Bowel Enteroscopy.

#### **What is a Small Bowel Enteroscopy?**

A Small Bowel Enteroscopy is a procedure undertaken to look further into the small bowel than a Gastroscopy that only looks as far as the duodenum (first part of the small bowel) using a long flexible tube.

We are a large teaching Trust and so we are involved in teaching students and in research work. Qualified doctors and nurse practitioners in training to perform endoscopy may perform your test under supervision by a skilled endoscopist. You may also be asked to take part in research. If you do not feel happy about this, please tell a member of staff. You have the right to refuse and your decision will not affect your treatment in anyway.

#### **What are the benefits of a Small Bowel Enteroscopy?**

It allows the doctor to see if there is any disease present. It also allows if necessary a sample of tissue to be taken (called a biopsy), which is examined by the Pathology Department.

#### **What are the risks of a Small Bowel Enteroscopy?**

- There is a small chance of a reaction to the drugs used for sedation or occasionally even from the throat spray.
- You may have a slightly sore throat from the procedure, which will usually wear off within 24 hours.
- There is a very small risk of perforation (a small hole in the lining of the gullet, stomach or small bowel) and a small risk from bleeding.
- You must tell the nurse if you have any loose teeth or caps, crowns or veneers, as there is a risk they could become dislodged.

#### **Are there any alternatives to this procedure?**

The small bowel can be X-rayed using barium or there is a procedure that exists called pill enteroscopy, but it would only be performed after all other investigations. However these will not allow the doctor to view directly the lining of the small bowel and take samples or treat any abnormal findings.

## **What will happen if I don't have this procedure done?**

If you decide that you do not want this procedure undertaken then you can discuss alternatives with your doctor.

### **Preparation**

To allow a clear view, your stomach must be empty. You are therefore asked to have nothing to eat or drink for at least six hours before the test.

You will be asked to remove any tight clothing, ties, dentures, spectacles and contact lenses.

Please **do not** bring large amounts of money or valuables with you, as the Trust cannot be held responsible for them.

### **Important: If you have:**

#### **❖ Diabetes**

#### **❖ Are taking: (Warfarin tablets, Clopidogrel (plavix) tablets)**

#### **❖ Anticoagulants:**

- Warfarin
- Heparin/Low molecular weight heparin (including enoxaparin/dalteparin)
- Dabigatran
- Rivaroxiban
- Synthrome
- Apixaban
- Fondaparinux
- Edoxaban

#### **❖ Antiplatelet therapy:**

- Clopidogrel (Plavix)
- Prasugrel (Efient)
- Ticagrelor (Brilique)
- Dipyridamole (Persantin) and aspirin

#### **❖ Are on dialysis.**

#### **❖ Have suffered a heart attack within the last three months.**

**You must contact the Gastroenterology Unit as soon as you receive this information leaflet.**

**Tel: 0151 706 2656**

**Text phone number: 18001 0151 706 2656**

## **What anaesthetic / sedation will I be given?**

You may have a small amount of anaesthetic throat spray but sedation is **always** given for this procedure. This involves an injection into your arm through a small plastic tube fixed into your arm. This will make you very drowsy but not make you unconscious.

The advantage of sedation is that it will make the procedure more comfortable for you. The drugs used in sedation may affect your memory and concentration for up to 24 hours. Many patients remember nothing about the procedure or even what the doctor has said to them afterwards. You will be given the results on the ward by a doctor or nurse when you have recovered from the test.

The most important side effect of these drugs is to slow your breathing – this should not normally happen but sometimes patients can be oversensitive to the drug. This is the main reason we do not give high doses of these drugs. We also give you oxygen during the procedure.

**If you are worried about any of these risks, please speak to your consultant or a member of their team on the ward.**

When you come to the department, please tell the doctor or nurse about any drugs you are taking and in particular, about any possible allergies or bad reactions you may have had in the past.

## **Your Small Bowel Enteroscopy**

The test involves passing a slim telescope (less than the diameter of your little finger) through your mouth and down into the oesophagus, stomach and small bowel. This is not a painful procedure but the sensations are slightly unpleasant.

## **After your Small Bowel Enteroscopy**

You will be transferred back to the ward and allowed to sleep. A nurse will record your pulse, blood pressure and your temperature if necessary.

Once the effect of the throat spray has worn off, you may eat and drink as normal.

## **Minor post procedure symptoms**

You may or may not experience a sore throat. If you do, it can last for a couple of days but usually passes after a couple of hours.

Stomach ache is most likely due to the air inflated into your stomach during the procedure. This will pass in its own time.

## **Serious post procedure symptoms**

**Please tell the ward staff if you have severe pain in your neck, chest or stomach.**

## Results

Sometimes the doctor or nurse can give you the results on the day of the test. Sometimes biopsy, photography or other information is taken which may need to be assessed further and the result may not be available for a week or two. In this case the result will be sent to

your family doctor (GP) or be available to discuss with you during your next clinic appointment.

**If you are unable to keep this appointment, please let us know as soon as possible on**

**Tel: 0151706 2656**

**Text phone number: 18001 0151 706 2656.**

We will be able to give your appointment to another patient and arrange a further one for you.

## Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

## Further information

**If you have any questions or queries, please contact the Gastroenterology Unit during the following hours**

<b>Monday – Thursday</b>	<b>0800 – 2100 hrs</b>
<b>Friday</b>	<b>0800 – 1700 hrs</b>
<b>Saturday/Sunday/BH</b>	<b>0800 – 1600 hrs</b>

## Clinic appointment enquiries

**Tel: 0151 706 5555**

**Text phone number: 18001 0151 706 5555**

**The Emergency Department (A&E) is open 24 hours**

**Tel: 0151 706 2051/2050**

**Text phone number|:18001 0151 706 2051/2050**

## Hospital Royal Hospital

**Tel: 0151 706 2656/ 2819/2726**

**Text phone number: 18001 0151 706 2656/2819/2726**

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