Flexible Sigmoidoscopy
A guide to the test

Endoscopy Department
Central Operations Group

This leaflet has been designed to give you important information about your condition / procedure, and to answer some common queries that you may have.
What is a Flexible Sigmoidoscopy?

A flexible sigmoidoscopy is a test that allows a doctor to look directly at the lining of the large bowel (also called the colon or intestine), from the rectum (back passage) through to the last part of the large bowel (called the sigmoid colon).

During the procedure a thin flexible ‘fibre optic’ tube called a sigmoidoscope is passed through the anus (opening to the back passage) into the rectum and then the large bowel. The end of the sigmoidoscope contains a light and conveys images to a viewing screen allowing the doctor a clear view of the bowel lining. As well as looking at the lining, biopsies (small pieces of tissue samples for examination under a microscope) can be taken and polyps (small protruding growths) can be removed.

The test is usually carried out to investigate bowel symptoms such as bleeding from the anus, changes in bowel movements, abdominal pain or abnormalities revealed by other investigations, such as barium enema.

What do I need to know before admission?

You will be asked to attend the Endoscopy Unit, you can expect to be in the unit for approximately 1-2 hours (but it could be longer), your appointment time is not the time you will receive treatment. The appointment time is for you to discuss any concerns and for the nurses to assess whether you are medically fit to progress with the procedure. Please keep to the time stated on your letter.

Also please be aware that your procedure may be delayed or cancelled at short notice. In these cases we offer apologies for any inconvenience and aim to reschedule your appointment as soon as possible.
Preparing yourself for admission.

Stop taking iron tablets. If you are on Warfarin tablets or have Diabetes please contact the Endoscopy Unit.

Stop taking any constipating agents i.e. Lomotil, Codeine Phosphate, etc which you may be prescribed but continue with all other laxatives until your appointment.

You may be given some medicine to clear your bowel at your clinic appointment; if this has not been given an enema will be given on the Endoscopy Unit when you arrive for your flexible sigmoidoscopy.

Could you please bring a dressing gown and slippers with you when you attend the Endoscopy Unit.

Please leave all valuables, including all jewellery (except wedding bands) at home, as we do not have secure facilities to store such items.

If you are undergoing a barium enema please note that there should be a 10 day interval between your procedures.

What happens on admission?

On the day of admission a nurse will complete an admission document with all your personal details. They will check your pulse, blood pressure and oxygen levels. The nurse will explain the procedure to you, inform you of any potential risks and complications of a flexible sigmoidoscopy, and also answer any questions you may have. The doctor or endoscopy technician / nurse will then ask you to sign the consent form for the procedure once you have read it carefully and understood it in full.

You will then be asked to change into a hospital gown and dressing gown and slippers. Dentures, contact lenses and spectacles can be removed later on; the nurse will tell you when.

Please note that relatives/friend bringing you to your appointment will not be able to stay with you. They can either wait downstairs in the reception area or leave a telephone number where we can contact them. We will then contact them as soon as you are ready to be discharged, this could be 1-2 hours.

What happens during the Flexible Sigmoidoscopy?

You will be taken to an examination room for the procedure. The nurses will help you to lie down in the correct position on a couch, resting on your left side with your knees bent. A nurse will stay with you throughout the procedure.

Firstly, the scope is lubricated with jelly and gently passed through the anus into the large bowel. Air will then be passed through it to distend (open) the bowel to allow a clear view of the lining. It is common to experience a feeling of fullness in the rectum and maybe mildly uncomfortable, but this is usually very well tolerated.

If the doctor finds any change in the tissue a tiny piece may be removed (biopsy) using instruments passed through the scope. If any polyps are found, these may also be removed (polypectomy) or you may be asked to come back at a later date to have it removed. Any samples of tissue removed, including polyps, are sent to the laboratory for specialist examination.

The procedure can last from 10 to 20 minutes. During the procedure you may feel slight cramping in your lower abdomen and you may feel you need to pass wind or open
you bowels, this is quite normal so do not worry, please do not feel embarrassed if this does occur; your bowel will be empty and if there is still some fluid left in the bowel it can be ‘sucked away’ by a channel in the scope.

What happens after the flexible sigmoidoscopy?

After the test you can expect to rest for a while in the recovery area on the unit. The nursing staff will check your pulse, blood pressure and oxygen levels, and generally assess how you have recovered from the test. If you feel unwell at all please let the staff know.

You may feel a little bloated and experience wind pains, due to the air passed into the colon during the test, please don’t feel embarrassed if you need to pass wind, this will help relieve the discomfort quite quickly. If you are in pain, please inform the endoscopy staff as soon as possible.

You will be given something to eat and drink, if you are diabetic you may bring a sandwich with you and this can be stored for you until you are ready to eat it.

You will then be able to get changed and once you are ready to leave the nurse will speak to you about the flexible sigmoidoscopy, answer any questions you may have, and will issue you with a discharge letter.

Discharge advice

You may find that if you have had biopsies taken or polyps removed, you pass small traces of blood from your back passage following your procedure. This should not persist however or increase in amount. If this does occur or you start to feel unwell or develop severe abdominal pain, you must contact the unit, your GP or the GP emergency centre as soon as possible.

What are the benefits of having a flexible sigmoidoscopy?

The test is usually carried out to investigate bowel symptoms such as bleeding from the anus, changes in bowel movements, abdominal pain or abnormalities revealed by other investigations, such as barium enema.

Having a flexible sigmoidoscopy allows us to see the lining of the bowel to aid any diagnosis and treatment. We are also able to obtain small samples of tissue known as biopsies which again will allow your doctor to get a diagnosis.

What are the risks and complications of flexible sigmoidoscopy?

It is very important that you are aware of the potential risks and complications of flexible sigmoidoscopy before having the procedure. These include:

- Internal bleeding (haemorrhage)
  
  This may occur at the site of the biopsy or where the polyp has been removed. The bleeding is usually resolved without any treatment but in the minority of cases may be serious.

  The risk of internal bleeding is approximately 1:2000. The likelihood of serious bleeding is generally associated with the removal of larger polyps.

- Perforation

  Damage to the lining of the large bowel (perforation) may result in the leakage of
intestinal contents into the abdominal cavity. The risk of perforating the bowel is 1:1000. This can be a potentially serious complication, and may need to be surgically repaired.

Are there any alternatives?

Barium Enema

If you have blood in your stools, some hospitals in the UK recommend a test called a Barium Enema.

For this test your bowel is filled with a dye that shows any cancer, polyps or weaknesses in the bowel (diverticular disease) on an x-Ray.

The test is done in hospital by specially trained doctors called Radiologists. Some people have a barium enema, then a flexible sigmoidoscopy or colonoscopy. For example, if your barium enema showed up a polyp you might have a flexible sigmoidoscopy or colonoscopy to have it removed.

Do you need further information?

Department of General Medicine
Endoscopy Unit

If you have any queries or concerns, please contact:

For the Diana Princess of Wales Hospital:
Normal hours
Endoscopy Pre-assessment nurse (01472) 874111, Ext 7341
Telephone the unit direct on (01472)875236 between the hours of 8am until 6pm, Monday to Friday.

Or telephone the Diana Princess of Wales Hospital, Grimsby on: (01472) 874111 and ask for the Endoscopy Unit.

For Scunthorpe General Hospital:
Telephone – 01724 290007 and ask for the Endoscopy Unit

For Goole Hospital:
Telephone - 01405 720720 ext 4119

Sources of further information / support

CancerBACUP
3 Bath Place, Rivington Street, London EC2A 3JR
Tel: 020 7696 9003 or Freephone 0800 181199
Fax: 020 7696 9002
www.cancerbacup.org.uk

Coeliac Society
PO Box 220, High Wycombe, Bucks, HP11 2HY
(Please enclose a stamped addressed envelope with your with your enquiry)

Core
FREEPOST LON 4268
London NW1 OYT
www.corecharity.org.uk

National Association for Colitis & Crohn’s Disease (NACC)
4 Beaumont House, Sutton Road, St Albans, Herts, AL1 5HH
Tel: 01727 844926 (information line)
Fax: 01727 862550
www.nacc.org.uk

For more information about our Trust and the services we provide please visit our website. www.nlgnhs.uk
References used in the compilation of this leaflet


Concerns and Queries

If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

For Diana, Princess of Wales Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01472) 875403 or at the PALS office which is situated near the main entrance.

For Scunthorpe General Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which is situated on C Floor.

Alternatively you can email: nlg-tr.PALS@nhs.net

Confidentiality

Information on NHS patients is collected in a variety of ways and for a variety of reasons (e.g. providing care and treatment, managing and planning the NHS, training and educating staff, research etc.).

Everyone working for the NHS has a legal duty to keep information about you confidential. Information will only ever be shared with people who have a genuine need for it (e.g. your GP or other professionals from whom you have been receiving care) or if the law requires it, for example, to notify a birth.

Please be assured however that anyone who receives information from us is also under a legal duty to keep it confidential.

Moving & Handling

The Trust operates a Minimal Lifting Policy, which in essence means patients are only ever lifted by nursing staff in an emergency situation.

Patients are always encouraged to help themselves as much as possible when mobilising, and if unable to do so, equipment may be used to assist in their safe transfer.

If you have any questions regarding moving and handling of patients within the Trust, you may speak to any member of the nursing staff, the designated keyworker within the department or the Trust Moving & Handling Coordinator.

Zero Tolerance - Violent, Threatening and Abusive Behaviour

The Trust and its staff are committed to providing high quality care to patients within the department. However, we wish to advise all patients / visitors that the following inappropriate behaviour will not be tolerated:

- Swearing
- Threatening / abusive behaviour
- Verbal / physical abuse
The Trust reserves the right to withdraw from treating patients whom are threatening / abusive / violent and ensuring the removal of those persons from the premises.

All acts of criminal violence and aggression will be notified to the Police immediately.

Risk Management Strategy
The Trust welcomes comments and suggestions from patients and visitors that could help to reduce risk.

Perhaps you have experienced something whilst in hospital, whilst attending as an outpatient or as a visitor and you felt at risk.

Please tell a member of staff on the ward or in the department you are attending / visiting.

Northern Lincolnshire and Goole Hospitals NHS Foundation Trust
Diana Princess of Wales Hospital
Scartho Road
Grimsby
01472 874111

Scunthorpe General Hospital
Cliff Gardens
Scunthorpe
01724 282282

Goole & District Hospital
Woodland Avenue
Goole
01405 720720

www.nlg.nhs.uk

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