

Information for patients and carers

# Colonoscopy

Afternoon and Evening  
Appointment  
*(Using Moviprep)*



London  
Gastroenterology  
Centre

# Your appointment



Remember  
to contact your  
insurance  
company

Name:

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Date:

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Time:

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Location:

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## **You must contact your insurance company**

Please ensure that your insurance company authorises the test **BEFORE** you arrive at the hospital. Please contact us and advise us of the pre-authorisation code.

The code for Colonoscopy is H2002

**For further information please contact us**

+44 (0)20 7183 7965

[info@gastrolondon.co.uk](mailto:info@gastrolondon.co.uk)

[www.gastrolondon.co.uk](http://www.gastrolondon.co.uk)



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Gastroenterology  
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# What is a colonoscopy?

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A colonoscopy is a test to examine the inner lining of our large bowel (colon). This is done while you are drowsy if you have opted for sedation.

The doctor will gently insert a flexible tube (colonoscope) through the back passage (anus) into the large bowel (colon).

The colon will be gently inflated by passing air through it to give a clearer view of the bowel lining and the doctor will check whether any disease is present

When the test is finished, the colonoscope is removed quickly and easily. The test takes approximately 30 minutes.

You must  
not drink for  
**4 hrs**  
before the  
tests


You will be  
in the  
hospital for a  
total of around  
**3 hrs**

There are a few important points to note:

- Please read the attached instructions for bowel preparation and diet carefully. These are essential for a successful colonoscopy.
- If you are diabetic, taking insulin, warfarin or clopidogrel and are unsure whether to change these medicines, please ask for specific instructions on what to do.
- Please ensure someone can take you home as you will not be allowed to drive after having sedation.

# Preparing for the test

## 7 days before the procedure



Please check with us for your instructions

Stop **iron tablets** including multivitamins but continue other medications and laxatives you usually take. If you are unsure whether to stop any medicines, please contact us.

If you are taking **clopidogrel (Plavix)** for a coronary artery stent, you must only stop this after discussion with the doctor.

Other patients taking **clopidogrel** should usually stop this 7 days before the procedure. If you are unsure whether you should stop this you must ask us.

We usually ask patients to stop taking **warfarin** for 7 days before the procedure also. If you have had a heart valve replacement, you must not stop your warfarin but you must let us know. You may require a special drug regime before the test.

If you are taking one of the new blood thinning agents such as **apixaban, rivaroxaban** etc, you will usually need to stop these 2 days before the procedure. Please check with us.

## 2 days before the procedure

The success of your test depends on your colon (bowel) being as empty as possible. To help this happen you will need to change your diet two days before the colonoscopy.

**Do not eat any high fibre foods** such as wholemeal bread, cereals, fruit, nuts, vegetables, salad and muesli. Also do not eat red meat.

**Please eat only low fibre foods** eg. chicken, fish, eggs, cheese, white bread, pasta, etc.

**Specific low fibre foods, which can be taken on the two days before your colonoscopy:**

**Cereals:** Only rice krispies or cornflakes

**Bread:** Only white bread or toast

**Eggs:** Scrambled, fried, poached or boiled

**Meat:** Fish or chicken

**Rice:** White rice

**Pasta:** White pasta

**Potatoes:** Boiled, mashed, fried, baked. Don't eat the skin

**Cheese:** Any cheese and cheese sauce

**Dairy:** Butter, margarine, milk and yogurt (plain)

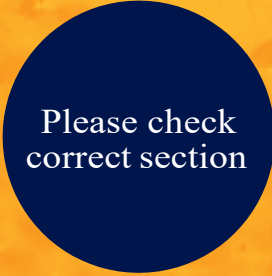
**Spreads:** Seedless jam or marmite

**Vegetarian:** You may eat tofu or soya products

**Dessert:** Ice cream, jelly (plain)

# Preparing for the tests

## Diabetic Patients



Please check correct section

- **Once daily morning insulin:**  
**Morning before procedure:** Take insulin normally.  
**Morning of procedure:** take normal dose after procedure is finished.
- **Once daily evening insulin:**  
**Evening before procedure:** Take HALF normal insulin dose.  
**Evening after procedure:** Take normal insulin dose.
- **Twice daily insulin:**  
**Day before:** Normal dose in morning. Take HALF dose in the evening.  
**Morning of procedure:** take normal dose when you eat after procedure is finished.
- **Four times daily insulin:**  
**Day before:** Normal insulin dose in morning and lunchtime. No insulin at supper time. Halve the bedtime dose.  
**Day of procedure:** Restart normal insulin regime but only after the procedure is finished
- **For patients taking tablets:** You should stop all diabetic tablets after lunchtime on the day before the procedure. **Please always check with us.**



## Other Medication

## 1 day before the procedure

You should follow any specific advice you have been given with regard to your regular medications. Medications that you may have been asked to temporarily discontinue include:

- Diuretics (water tablets)
- Non-steroidal anti-inflammatory drugs

Patients taking immunosuppression for transplanted organs should seek the advice of their doctor before taking oral bowel cleansing agents.

Patients using the oral contraceptive pill should take alternative precautions for a week after taking oral bowel cleansing agents.

Have a light breakfast and a light early lunch eating only the low fibre foods listed.

### **After 1800hr (6pm):**

No food is now to be taken until after your examination. Please continue to drink plenty of fluids (black tea, soup, black coffee, fruit squash, clear soup) but do not take fruit juice and do not take milk in your tea and coffee

Routine oral medication should not be taken within 2 hours of administration of bowel cleansing preparations as it may be flushed through by the Moviprep and not absorbed.

# What is Moviprep?

MOVIPREP  
is a lemon  
flavoured  
powder

## How to take Moviprep

**MOVIPREP is a lemon flavoured powder. It can also be mixed with squash or fruit juice (without bits) no red cordials, blackcurrant or cherry. Each pack contains two large sachets (Sachet A) and two small sachets (Sachet B). You need to use all of these for one treatment.**

**You need to drink 1 litre on the evening before and 1 litre on the morning on the day of your appointment.**

**Continue to drink clear fluids until 4 hours before the test.**

**START DRINKING  
8PM**

**STOP DRINKING  
10PM**

**REST PERIOD:  
Overnight**

**START DRINKING  
8AM**

**STOP DRINKING  
10AM**

**APPOINTMENT:  
In the afternoon or evening**

# Moviprep Instructions

1. Each box of MOVIPREP contains 2 sealed plastic bags. Open one bag and remove sachets A and B.
2. Empty the contents of sachet A and sachet B into an empty jug. Add 1 litre of water (not chilled)
3. Stir the solution until the powder had dissolved and the MOVIPREP solution is clear or slightly hazy. This may take up to 5 minutes.
4. Drink one glassful (250ml) of MOVIPREP about every 15 minutes until the jug is empty. You may prefer the taste if you mix the Moviprep with lemon or orange squash and if you keep it cold in the fridge.
5. When you are due to take the second litre of MOVIPREP follows steps 1 to 4 again for the other sachets A and B
6. With each litre of MOVIPREP you drink, you should drink at least a further two glasses (approx 500ml) of clear fluid e.g. water, clear soup or tea or coffee without milk.
  - You should not drink for 4 hours before the procedure
  - You may wish to place a barrier cream (e.g. Vaseline or a zinc based cream) around the back passage after you open your bowels to prevent the area becoming sore.



What happens on the day of the procedure?

What happens when I arrive at the hospital?

**You are not allowed to drink any fluids for 4 hours before your colonoscopy. Please continue to take all medication as normal including the day of the procedures unless you have been advised otherwise.**

Please go to the endoscopy unit. You will be shown to your cubicle where you will meet the nurse who will look after you during your stay. She will also verify your personal details and preferred method of payment.

The nurse will then prepare you for your procedures. If you have any worries or questions at this stage don't be afraid to ask.

The staff will want you to be as relaxed and informed as possible for the test and will be happy to answer your queries.

**The procedure will happen about half an hour after you arrive.**

**Your doctor will explain the test to you and will ask you to sign a consent form. This is to signify that you understand the test and its implications.**

Please tell the consultant or nurse if you have had any allergies or bad reactions to drugs or other tests.

## During the test

Colonoscopy usually takes around

**30-60**  
mins

Most people prefer to be sedated (sleepy) for the tests. The doctor will administer the medication (painkillers and sedation) via a small plastic tube placed in the back of your hand or arm.

The medication may take a few minutes to work. The medication makes you relaxed and drowsy; it is not a general anaesthetic.

You may be asked by the doctor to change position during the colonoscopy. This makes the test more comfortable for you and quicker for the doctor to perform.

During the colonoscopy you may get some wind-like discomfort. You may get the sensation of wanting to go to the toilet, but as the bowel is empty there is no danger of this happening.

The air that has been passed up into the bowel will obviously have to come down again as wind; please do not worry about this, the staff understand what is causing it.

Sometimes the doctor takes a biopsy (a sample of the bowel lining). A small piece of tissue is removed painlessly through the scope, using tiny forceps.

This is then sent to the laboratory for further tests. Polyps (collections of abnormal tissue which can lead to cancer) can be removed safely and painless

## Does it hurt?

The procedures should not be painful but may feel uncomfortable. This is because of the air that the doctor puts into your bowel to inflate it or pressure from the endoscope. If it is uncomfortable let us know. The doctor can remove some of the air. Also passing the air yourself will make you feel more comfortable.

## What happens after my procedure?

After the colonoscopy, you will return to your cubicle. You will stay there for approximately one hour so the effects of the sedation can wear off. Your blood pressure and oxygen levels will be monitored during this time. You will also be offered a drink and some biscuits. You may bring your own food if you prefer. If you do not have sedation you will not need to stay in recovery for as long.

One of the doctors or nurses will come to explain the results of your colonoscopy. You should expect to stay in the hospital for a total of 2-3 hours.



## What happens when I go home?

If you have had sedation, do not use public transport, particularly if you will need to stand on the train or bus.

- **DO NOT** drive yourself. Please have someone to take you home in a car or taxi
- **DO NOT** drink alcohol for 24 hours after sedation is given
- **DO NOT** drive a car or operate heavy machinery for 24 hours after sedation is given

Once you get home you may eat and drink as normal.

You may find that you feel a bit full up or bloated. This is because of the air in your bowel. This feeling usually only lasts for a few hours but may last for a few days in some people.

**Peppermint** or **chamomile tea** helps release the trapped wind and **buscopan** or **mebeverine tablets** can reduce any cramps you feel. These tablets can be bought at any chemist.

# FAQs

## What are the risks?

Colonoscopy is a common test with very few side effects or complications. However you should be aware of the following complications.

Overall, the risks for both bleeding and perforation are about 1 in 1,000.

When any form of treatment is given, the risks rise but are still very low. If a polyp is found and removed, the risk of perforation rises to 1 in 600 but the risk of bleeding rises to 1 in 50 to 1 in 100 procedures. This is usually mild, however, and can be stopped in most cases during the endoscopy.

If bowel perforation was suspected, you would probably have a scan to check the bowel and if necessary an operation to seal the perforation.

Sedation causes breathing problems in about 1 in 200 cases although these are usually mild (British Society of Gastroenterology). You will be monitored through out the procedure and the sedation can be reversed if necessary.



# What are the alternatives?

Sometimes the doctor is unable to complete the entire test. For colonoscopy, this may be due to poor bowel preparation or looping of the bowel. It is possible to miss abnormalities during the test.

Alternatives to colonoscopy include **barium enema** but this X-ray test is no longer used routinely.

**CT pneumocolon** is a newer test which also involves taking bowel preparation. On the day of the test, air is pumped into the bowel through a tube which is inserted into the back passage and a CT scan is performed. This test is less invasive than colonoscopy but it involves X-rays and the doctor cannot take biopsy samples or remove small polyps. Because of this, it is not as good as colonoscopy for most people.

**CT with faecal tagging** is similar to CT pneumocolon but does not involve formal bowel preparation. It is best reserved for elderly or infirm patients who would find colonoscopy or CT pneumocolon difficult to tolerate.

**MRI pneumocolon** avoids the need for X-rays and is thought to give similar quality pictures as CR pneumocolon. It is, however, a new test and we are not yet entirely certain of its overall accuracy.

# FAQs

## Cautions

Bowel preparation can be harmful although this is unusual.

There is a risk of developing dehydration, low blood pressure or kidney problems with this medication.

The doctor prescribing the oral cleansing agent will have assessed your risk and identified the most appropriate medication for you. You should refer to the manufacturer's instructions when taking your preparation however the following rules apply:

- The prescribed dose of oral cleansing agent should not be exceeded.
- The oral bowel cleansing agent should not be taken over a period longer than 24 hours.
- No solid food should be eaten for at least two hours before taking bowel cleansing preparations.
- Oral bowel cleansing agents predispose to dehydration, so you should maintain good fluid intake whilst taking these medications.  
If you develop symptoms of dehydration such as dizziness, thirst or reduced urine, please seek medical attention.

# Delays

## **Additional side effects are listed below:**

- Nausea, vomiting, bloating, abdominal pain, anal irritation and sleep disturbance.
- If you have any allergic reactions including rash, itchy, redness and swelling please contact the endoscopy unit or the emergency services if you feel necessary.
- People who are particularly at risk of dehydration and loss of salts include the frail elderly, children, renal impairment, congestive cardiac (heart) failure, liver cirrhosis & those taking diuretics (Water tablets).

Sometimes due to emergencies and other unforeseen circumstances your appointment may be delayed. We try our best to see everyone on time but please understand that delays can occur and we ask for your patience in these circumstances.

# Private Appointments

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Gastroenterology Centre  
Princess Grace Hospital  
41 Welbeck Street  
London W1G 8DW

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# Endoscopy Units

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Princess Grace Hospital  
42-52 Nottingham Place,  
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Wellington Hospital  
Wellington Place,  
London NW8 9LE

King Edward VII's Hospital  
5-10 Beaumont Street  
Marylebone  
London W1G 6AA