Surgical procedure

Upper GI Endoscopy and Colonoscopy

IMPORTANT INFORMATION
This surgical fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional. If your injury or illness is critical or life threatening, call triple zero (000). To speak to a registered nurse, call healthdirect on 1800 022 222.

Notes and questions to bring to your doctor

For more help with what to ask your doctor, visit healthdirect.gov.au/question-builder

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Document code: E11lite  Expires: end of December 2019
This document will give you information about an upper GI endoscopy and colonoscopy. If you have any questions, you should ask your GP or other relevant health professional.

**What is an upper GI endoscopy and colonoscopy?**

An upper gastrointestinal (GI) endoscopy is a procedure to look at the inside of your oesophagus (gullet), stomach and duodenum using a flexible telescope (see figure 1). A colonoscopy is a procedure to look at the inside of your large bowel (colon) using a flexible telescope.

![Figure 1](https://example.com/figure1.png)

**What are the benefits of an upper GI endoscopy and colonoscopy?**

Your doctor is concerned that you may have a problem in your digestive system. An upper GI endoscopy and colonoscopy is a good way of finding out if there is a problem.

**Are there any alternatives to an upper GI endoscopy and colonoscopy?**

A barium meal is an x-ray test of your upper digestive system. Alternatives to a colonoscopy include a barium enema (an x-ray test of your large bowel) or a CT colography (a scan of your large bowel).

**What does the procedure involve?**

An upper GI endoscopy and colonoscopy usually takes about an hour.

If appropriate, the endoscopist may offer you a sedative or painkiller. The endoscopist will place a flexible telescope (endoscope) into the back of your throat and down into your stomach. From here the endoscope will pass into your duodenum. A colonoscopy involves placing a flexible telescope into your back passage and blowing some air into your large bowel to get a clear view. The endoscopist will be able to look for problems such as inflammation, ulcers or polyps. They will be able to perform biopsies and take photographs to help make the diagnosis.

**What complications can happen?**

- Sore throat
- Breathing difficulties or heart irregularities
- Allergic reaction
- Infection
- Blurred vision
- Making a hole in your oesophagus, stomach, duodenum or colon
- Damage to teeth or bridgework
- Bleeding
- Incomplete procedure

**How soon will I recover?**

If you were given a sedative, you will usually recover in about two hours. You may feel a bit bloated for a few hours but this will pass. You should be able to return to work the next day unless you are told otherwise. The healthcare team will tell you what was found during the procedure and discuss with you any treatment or follow-up you need. Regular exercise should improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

**Summary**

An upper GI endoscopy and colonoscopy is usually a safe and effective way of finding out if there is a problem with your digestive system.

**Acknowledgements**

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