

Patient Information for Consent



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PS09 Upper GI Endoscopy (child)

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Local Information

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What is an upper GI endoscopy?

An upper gastrointestinal (GI) endoscopy is a procedure to look at the inside of the oesophagus (gullet), stomach and duodenum using a flexible telescope (see figure 1). This procedure is sometimes known as a gastroscopy or simply an endoscopy.

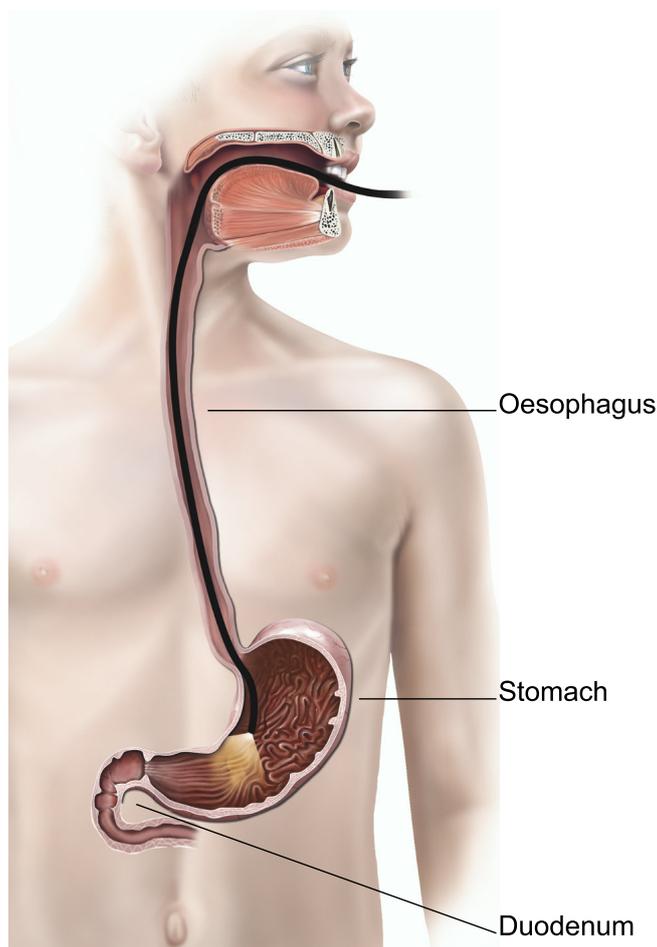


Figure 1
An upper GI endoscopy

Your doctor has recommended an upper GI endoscopy for your child. This document will give you information about the benefits and risks to help you to be involved in the decision. If you think your child is mature enough, it is best to discuss the procedure with them so they can be involved in the decision too.

If you have any questions that this document does not answer, ask your doctor or the healthcare team.

What are the benefits of an upper GI endoscopy?

Your doctor is concerned that your child may have a problem in the upper part of their digestive system. An upper GI endoscopy is a good way of finding out if there is a problem.

If the endoscopist (the person doing the endoscopy) finds a problem, they can perform biopsies (removing small pieces of tissue) to help make the diagnosis.

Are there any alternatives to an upper GI endoscopy?

Your doctor has recommended an upper GI endoscopy as it is the best way of diagnosing most problems with the upper digestive system.

A barium meal is an x-ray test of the upper digestive system. This test is not as accurate as an upper GI endoscopy, and if your doctor finds a problem your child may still need an upper GI endoscopy to perform biopsies.

What will happen if I decide that my child will not have an upper GI endoscopy?

Your doctor may not be able to confirm what the problem is. If you decide that your child will not have an upper GI endoscopy, you should discuss this carefully with your doctor.

What does the procedure involve?

Before the procedure

The healthcare team will carry out a number of checks to make sure your child has the procedure they came in for. You can help by confirming to the endoscopist and the healthcare team your child's name and the procedure they are having.

The healthcare team will ask you to sign the consent form once you have read this document and they have answered your questions.

Your child should not drink milk or eat in the 6 hours before the procedure. This is to make sure their stomach is empty so the endoscopist can have a clear view of their stomach. It will also make the procedure more comfortable for your child. If your child has diabetes, let the healthcare team know as soon as possible. You will need special advice depending on the treatment they receive for their diabetes.

Your child may drink water up to 2 hours before the procedure.

In theatre

The procedure is usually performed under a general anaesthetic and usually takes 20 to 30 minutes.

The endoscopist will place a flexible telescope (endoscope) into the back of your child's throat, down into their oesophagus and then into their stomach. From here the endoscope will pass into your child's duodenum.

The endoscopist will be able to look for problems such as inflammation or ulcers. They will be able to perform biopsies and take photographs to help make the diagnosis.

The procedure is not painful but your child's stomach may feel bloated because air is blown into the stomach to improve the view.

What complications can happen?

The healthcare team will try to make the procedure as safe as possible but complications can happen. Some of these can be serious and can even cause death.

The possible complications of an upper GI endoscopy are listed below. Any numbers which relate to risk are from studies of people who have had this procedure. Your doctor may be able to tell you if the risk of a complication is higher or lower for your child.

Your anaesthetist will be able to discuss with you the possible complications of having an anaesthetic.

Endoscopy complications

- Sore throat. This gets better quickly.

- Allergic reaction to the equipment, materials or medication. The healthcare team is trained to detect and treat any reactions that might happen. Let the endoscopist know if your child has any allergies or if they have reacted to any medication or tests in the past.

- Infection. It is possible to get an infection from the equipment used, or if bacteria enter your child's blood. The equipment is disinfected so the risk is low but let the endoscopist know if your child has a heart abnormality or a weak immune system. Your child may need treatment with antibiotics. Let your doctor know if your child gets a high temperature or feels unwell.

- Making a hole in the oesophagus, stomach or duodenum (risk: 1 in 2 000). The risk is higher if there is an abnormal narrowing (stricture) which is stretched (dilated). Your child will need to be admitted to hospital for further treatment which may include surgery.

- Damage to teeth. The endoscopist will place a plastic mouthpiece in your child's mouth to help protect their teeth. Let the endoscopist know if your child has any loose teeth.

- Bleeding from a biopsy site or from minor damage caused by the endoscope. This usually stops on its own.

You should ask your doctor if there is anything you do not understand.

How soon will my child recover?

After the procedure your child will be taken to the recovery area. Once they are awake enough and able to swallow properly, they will be given a drink. Your child may feel a bit bloated for a few hours but this will pass.

The healthcare team will tell you what was found during the endoscopy and discuss with you any treatment or follow-up that your child needs. Results from biopsies will not be available for a few days so the healthcare team may arrange for you to come back to the clinic for these results.

Summary

An upper GI endoscopy is usually a safe and effective way of finding out if your child has a problem with the upper part of their digestive system. However, complications can happen. You need to know about them to help you to make an informed decision about the procedure. Knowing about them will also help you to help the healthcare team to detect and treat any problems early.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Acknowledgements

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