

Having a gastroscopy to look inside your upper digestive tract

Endoscopy Unit

Information for Patients

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Introduction

You have been advised by your GP or hospital doctor that you need an examination known as gastroscopy. If you are unable to keep your appointment please call us as soon as possible. This will allow us to give your appointment to someone else.

If your BMI is greater than 40 and you are having your procedure at Melton, Loughborough, Hinckley or St Luke's Hospital, please contact the department before you attend as you may need to be rebooked at a different hospital in Leicester.

Why do I need to have a gastroscopy?

You may need to have a gastroscopy:

- to try and find the cause of your bowel problem, indigestion, anaemia, weight loss, vomiting, passing black poo, vomiting blood or difficulty swallowing.
- as a follow-up after a previous procedure.
- to look in more detail at something seen on an X-ray.

What is a gastroscopy?

This is an examination of your gullet (oesophagus), stomach and the first part of your small bowel (duodenum). The procedure is called a oesophago-gastro-duodenoscopy (OGD) also known more simply as a gastroscopy.

The instrument used in this examination is called a gastroscope. It is flexible and has a diameter less than that of a little finger. There is a light within the scope and a camera that sends pictures back to a television screen. This enables the endoscopist to have a clear view.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

The procedure may involve the following:

- **Biopsy** - sometimes the doctor or nurse performing the test will take a small piece of tissue (a biopsy) from the lining of the oesophagus, stomach or duodenum for further examination in a laboratory. This is not usually painful.
- **Dilation** - a dilatation can be performed if a narrowing of the gullet is found. This means stretching the narrowing to improve swallowing. Generally the need for this procedure will have been identified before your appointment and other information will be given.

Important information

Eating and drinking

Your stomach must be empty for this examination, to allow clear views. Therefore do not have anything to eat or drink for 6 hours before the procedure.

What about my medication?

- **Routine medication** – all routine medication should be taken as normal. **If you have a morning appointment, please take morning medication before 6am with a small sip of water.**
- **Antacid or digestive medication** - if you are taking tablets to reduce the acid in your stomach please stop taking them 2 weeks before your procedure. However if you are having a follow-up gastroscopy to check for healing of an ulcer found during the last 2 to 3 months, you can keep taking this medication right up to the day before your repeat endoscopy. If unsure please contact the Endoscopy Department for advice.
- **People with diabetes** – where possible you will be booked at the beginning of our list. Due to demand for this test this may not always be possible. If you have not received the 'Instructions for diabetics' leaflet, please contact the Endoscopy Department, or visit our online store of leaflets: <https://yourhealth.leicestershospitals.nhs.uk/library/chuggs/gastroenterology/endoscopy>

Before you go home we will offer you a drink and biscuits, but please bring a snack if you would like anything else.

- **Blood thinning medication (anticoagulants)** - please contact your Endoscopy Department or the appointment booking team for advice if you take any blood thinning medications.

How long will I be in the department?

This depends on how busy the department is and how quickly you recover after the procedure. You can expect to be with us for 2 to 4 hours. This may be longer during busy periods, although we aim to keep waiting times to a minimum.

We also provide emergency procedures and these can take priority over our outpatient lists.

What happens when I arrive?

When you arrive please book in at the reception desk. A nurse will take you from the waiting area to an admission room on the ward. We do not allow relatives into the unit, due to regulations and for the privacy of our patients. Relatives are not able to wait in our reception area, unless they are your carer or it is arranged and agreed with endoscopy staff.

Admission

- A nurse will check your personal details. They will also check the information you have completed before the appointment (enclosed with appointment letter). This information includes medication you are taking, past medical history, any operations or illness that you may have had or any current health problems.
- The nurse will want to know if you have any allergies or bad reactions to drugs.
- If you are having sedation, the nurse will check who the responsible adult is who will take you home when you are ready for discharge.
- Your blood pressure, heart rate, temperature and oxygen levels will be recorded and if you are diabetic, your blood glucose level will also be recorded.
- You will not need to remove any clothing for this procedure.

For the short time that you are with us, we want to provide a safe and supportive environment. Do not be afraid to ask if you have any questions or worries at this stage.

Pain relief

Sedation:

Sedation is not usually needed for a gastroscopy, however, should you feel very anxious you can discuss sedation with the endoscopist. It is given as an injection and will make you feel sleepy and relaxed. It is not a general anaesthetic and therefore you will not be fully asleep. It is quite common not to remember parts of the procedure afterwards due to the effects of the sedation.

Older people and those who have significant health problems (e.g. people with breathing difficulties due to a bad chest) may need additional assessment before having sedation.

It is important that you understand the sedative injection can last longer than you think and will remain in your body for up to 24 hours. **Therefore for 24 hours:**

- **do not drive a car, ride a bicycle, or climb ladders.**
- **do not operate any machinery or do anything needing skill or judgement.**
- **do not make important decisions or sign any documents.**
- **do not drink alcohol.**

A responsible adult relative or friend must take you home and must stay with you for 12 hours. If you are being transported by ambulance you must have someone waiting at home to stay with you.

Anaesthetic throat spray:

The throat is numbed using a local anaesthetic spray. Many patients are happy for the procedure to be carried out without sedation and to have the throat spray instead. The spray has an effect very much like a dental injection.

The benefit of choosing the throat spray is that you are fully conscious and aware, and can go home by yourself very soon after the procedure. You can drive and carry on as normal.

After the throat spray you are not able to have anything to eat or drink for 45 minutes after the procedure, until the sensation in your mouth and throat has returned to normal. We strongly advise that your first drink after throat spray is cold and should be sipped to avoid choking.

What happens during the procedure?

- In the procedure room you will have the opportunity to ask any final questions.
- You will be asked to remove any dentures and your teeth will be protected by a small plastic mouth guard.
- The local anaesthetic spray will be sprayed onto the back of your throat whilst you are sitting up and you will be asked to swallow this. You will quickly notice that your tongue and throat become numb but you will still be able to swallow and breath normally.
- The endoscopy nurse looking after you will ask you to lie on your left side and will then place an oxygen monitoring probe on your finger.
- If you decide to have sedation this will be given at this time into the cannula in your vein. Your blood pressure, oxygen levels and heart rate will be closely monitored during the test.
- Any saliva or other secretions produced during the procedure will be removed using a small suction tube, like the one used at the dentist.
- The endoscopist will put the gastroscope into your mouth, down your food pipe (oesophagus) into your stomach. Your breathing will not be affected.
- Samples (biopsy) may be taken from the lining of your stomach or food pipe and sent for testing.

The gastroscopy procedure will normally take around 5 to 10 minutes.

What happens after the procedure?

- You will be allowed to rest for as long as you need. Your blood pressure, heart rate and oxygen levels will be recorded and your blood glucose level will be checked if you are diabetic.
- If you have had sedation you will be monitored in the recovery area for at least 30 minutes but this could be up to 2 hours.
- If you have not had sedation, you can expect to go home within 30 minutes of the procedure.

- A nurse will look after you until you are ready to go home.
- Before discharge we will offer you a drink and biscuits, but please bring a snack if you would like anything else.

Going home

After your procedure we will tell you what time you can start drinking again. After the throat spray has worn off, you can eat and drink as normal.

If you have had sedation someone will need to collect you from the department and take you home.

When will I get the results of the gastroscopy?

You may not see the person who performed your procedure before going home, but a nurse will tell you the results before you leave. It is a good idea to have someone with you for this if you have had sedation, as many people find they forget what they were told.

If a sample (biopsy) has been taken, the result can take several weeks and these will be sent to your referring doctor. You may then get a letter informing of you of the results or be given an outpatient appointment to discuss your results.

A report of the procedure will be sent to your GP and you will normally receive a copy on the day of your procedure.

What are the risks of the procedure?

Main risks of the procedure:

- Damage to teeth or bridgework.
- Tear (perforation) of the lining of the stomach or oesophagus (about 1 in 5000 cases).
- Bleeding (1 in 1000).
- Bleeding at the site of any biopsies which almost always stops on its own.
- Being unable to complete the test.
- Sedation can occasionally cause problems with breathing, heart rate and blood pressure. If any of these problems occur, they are normally short lived. You will be carefully monitored by a fully trained endoscopy nurse to make sure any potential problems are identified and treated quickly.
- Risk to life (very rare).

Contact details

If you are unable to make your appointment, please let us know as soon as possible as we may be able to offer it to someone else. If you need to talk about your appointment please contact:

- Leicester General / Leicester Royal / Glenfield Hospital - **Endoscopy booking team on 0116 258 3910** (10am to 4pm).
- Loughborough / St Luke's / Hinckley / Melton Hospital - **Endoscopy booking team on 01509 564402**.

For queries about your procedure please contact the appropriate Endoscopy Department:

Leicester General Hospital:	0116 258 4183
Leicester Royal Infirmary:	0116 258 6997
Glenfield Hospital:	0116 258 3130
Hinckley Community Diagnostic Centre:	0116 502 1614
Loughborough Hospital:	01509 564406
Melton Mowbray Hospital:	01664 854904
St Luke's Hospital Market Harborough:	01858 448344

Trainees and student observers

Leicester's Hospitals support trainees and students from the county's medical school and nurse training school. We hope you will be willing for student observers to be present and for trainees with the relevant skills to undertake the procedure under supervision, where appropriate.

If you would rather not have students or trainees in the room during your procedure, please let us know.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।
Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

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