Gastroenterology Directorate

PATIENT INFORMATION

Inpatient Sedation and Anaesthesia during Endoscopy

Endoscopy and Sedation

You have been advised to have an Endoscopy. This is an examination of the inner lining of your stomach or bowel done by passing a thin flexible tube into your body through your mouth or anus. The exact nature of the examination should have already been explained to you and you should be given an information sheet about the particular examination. Sometimes operations can be done by endoscopy, and this will be explained to you if it is relevant to your case.

Most patients tolerate endoscopy extremely well. Some examinations can be done with no sedation – a gastroscopy or flexible sigmoidoscopy for example.

- For a gastroscopy, we recommend you have spray to the back of your throat of local or topical anaesthetic. This will numb your throat and may give you a sensation of having a lump in your throat. It doses not affect your swallowing or your breathing but allows you to tolerate the endoscopy better.

- For a flexible sigmoidoscopy, an examination of the first part of your large bowel through your anus (back passage), the procedure is short and most patients tolerate it well without sedation – you may have a little abdominal discomfort that feels like wind pain.

Almost all other types of endoscopy and any operations done by endoscopy will require sedation. There are a few drugs that we use commonly for this, Midazolam and Fentanyl. These drugs are given through a tiny plastic tube inserted into your vein.

Midazolam is a drug, which is like Valium; you may be familiar with it. It acts for a short time and may make you sleepy – some patients fall asleep and remember nothing, others are nice and relaxed. Pethidine and Fentanyl is a drug, which is a bit like Morphine used to dull pain for some procedures.
Will I be awake during the endoscopy?

Sedation is not a general anaesthetic and you may feel awake during the procedure. Its purpose is to relieve any anxiety and help you relax, not to put you asleep.

Why can’t I be asleep completely?

Sedation is safer than a general anaesthetic. All patients respond slightly differently to these drugs – some go very drowsy, others are quite awake but relaxed. As long as you are comfortable during the procedure, it will be safe to continue. We cannot give more than the recommended amount of these drugs in case of side effects.

What side effects can I have?

The drugs may affect your memory or concentration for up to 24 hours. Many patients remember nothing about the procedure for even what the doctor has said to them afterwards. Your results from the test will be fully explained when you have returned to the ward and are fully recovered from the test.

Some patients can be oversensitive to the drugs used in sedation, which can cause problems with their heart or breathing. This is the main reason we do not give high doses of these drugs. We will also give you oxygen during the examination.

If you are worried about this and think you may be affected by sedation, or are concerned that you might have problems with your heart or breathing, please tell your doctor or nurse before you have your procedure.

Author: Gastroenterology Department
Review Date: October 2009
Review Date: October 2012

This leaflet is available in large print, audio / computer disc, Braille and other languages on request.