

Colonoscopy

Answering your questions about colonoscopy

What is a colonoscopy?

Colonoscopy is a procedure that allows a colonoscopist to see the inside lining of the rectum and colon using a special instrument called a colonoscope.

A colonoscope is a flexible tube with a miniature camera attached to one end so that the colonoscopist can take pictures and videos of your colon. During a colonoscopy, tissue samples can be collected and polyps can be removed.

The procedure is performed by a colonoscopist (physician trained to perform a colonoscopy) and usually takes 20 to 45 minutes to complete.

You will be closely monitored before, during and after the procedure.

Before the colonoscopy

- Expect to be at the hospital for two to three hours.
- You will be asked to change into a gown.
- A nurse will complete your admission history and measure your vital signs.
- You will be asked to provide a list of your medications.
- A nurse will start an intravenous (IV) to administer sedation and pain medication.

What happens during a colonoscopy?

- A colonoscopist inserts the colonoscope into the rectum and advances it along the length of the colon.
- Air is sent through the colonoscope to expand the colon for better viewing. It is normal throughout the
 procedure to feel slight pressure or experience cramps.
- Images of the lining of the rectum and colon are sent to a video monitor where the colonoscopist will look for anything unusual, like a polyp. A polyp is a small growth of tissue on the wall of the intestine.
- Polyps can grow very slowly, and some can become cancerous. It may be necessary to take a sample (biopsy) or remove the polyp (polypectomy). This is painless.
- The biopsy or polyp is then sent to a lab for analysis.

What happens after a colonoscopy?

- Have an adult accompany you home. You cannot drive until the following day.
- You may be sleepy after you arrive home from the procedure. It is recommended that you do not operate equipment, sign legal papers or drink alcohol until the following day.
- You will be able to resume your regular diet and medications after your colonoscopy, unless otherwise directed by the health care team in your community.
- The air inside your colon may cause you to feel bloated and/or have cramping after the procedure. It is important to relax and pass the air as soon as possible. If this discomfort increases or is unrelieved, go to the emergency department and advise them that you had a colonoscopy.

What do I need to know about my colonoscopy results?

You will be given preliminary results before you leave the hospital. Then, approximately two weeks after your procedure, the health care team in your community will inform you of your complete results and answer your questions during the follow up call. Your doctor will also receive your results.

If your colonoscopy is normal, your family history will determine when you will be re-screened. The health care team in your community will advise you of your next screening date.

If your colonoscopy is abnormal, further procedures or more regular surveillance may be necessary. The health care team in your community or your doctor will explain the process for further appointments and next steps.

Who should get a colonoscopy?

Colonoscopy is recommended for individuals up to age 74 (inclusive), including those with:

- An abnormal fecal immunochemical test (FIT) result; or,
- A personal history of adenomas. Adenomas are a type of precancerous polyp; or,
- One first degree relative (parent, sibling or child) with colon cancer diagnosed under the age of 60; or,*
- Two or more first degree relatives with colon cancer diagnosed at any age.*

Are there any risks with colonoscopy?

As with any medical procedure, colonoscopy has a small risk of complications.

Approximately 5/1,000 people will have a serious complication. Complications can include a reaction to the bowel preparation or medication used for sedation, heart or lung problems, an infection, bleeding from the colon and/or perforation of the colon (hole in the colon).

If a complication occurs, treatment including antibiotics, blood transfusion, hospitalization, repeat colonoscopy or surgery may be required. The risk of dying from colonoscopy is less than 1/14,000. There is also a risk of missing a significant abnormality. This occurs in less than 1/10 cases.

Certain cancers may never cause any symptoms or affect life expectancy or quality of life. However, research shows that most colon cancers are harmful and that colon cancer should be detected and treated as early as possible.

Contact Us

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^{*}For those with a family history of colon cancer, colonoscopy screening can start at age 40 or 10 years younger than the age of diagnosis of the youngest affected first degree relative – whichever is earliest.