

WHAT IS A COLONOSCOPY?

A colonoscopy is a procedure used to diagnose abnormalities of the large intestine and screen for colorectal cancer and polyps. The procedure is frequently performed in an outpatient setting with minimal discomfort and disruption to the patient's normal schedule. Because a colonoscopy allows doctors to identify and remove certain types of colon polyps that could develop into cancer, it can be considered preventative or diagnostic and potentially lifesaving.

WHO SHOULD HAVE A COLONOSCOPY?

A colonoscopy is recommended for adults starting at age 45 as a part of a colorectal screening program. Screening refers to the process of examining otherwise healthy patients in an effort to detect previously undiagnosed colon polyps or cancer. The goal of a screening program is to detect disease at its earliest stages to allow for successful treatment. Individuals with a family history of colorectal cancer or polyps may be referred for a colonoscopy earlier and more frequently than those without a family history of cancer.

COLONOSCOPY MAY ALSO BE RECOMMENDED FOR PATIENTS:

- Who have a personal history of colon or rectal polyps or cancer
- Who experience rectal bleeding
- Who experience a change in bowel habits
- Who experience unexplained abdominal pains

WHO CAN PERFORM A COLONOSCOPY?

A colonoscopy is performed by colorectal surgeons, gastroenterologists, or general surgeons.

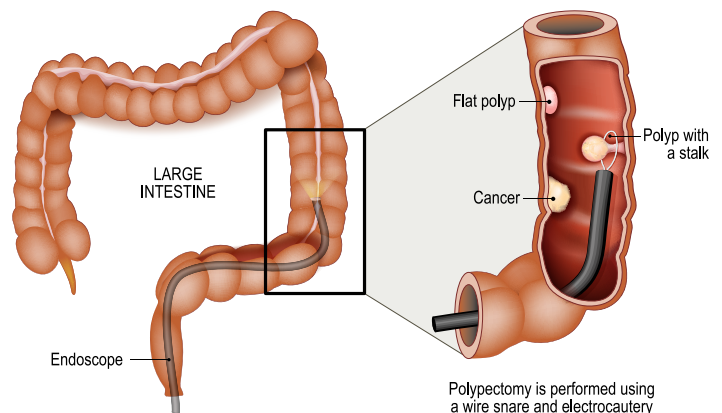
HOW IS A COLONOSCOPY PERFORMED?

The day before the colonoscopy, the patient must complete a bowel prep prescribed by their physician.

This preparation consists of liquids, pills, or an enema and is designed to clean the bowels of stool and other residue, allowing for complete visualization of the bowel surface during the procedure. The physician will provide a list of dietary and medication restrictions to follow in the days leading up to the colonoscopy. The most important part of the procedure is the completion of the cleansing process. Patients should not hesitate to discuss questions or concerns with their physician prior to the day of the procedure.

During the colonoscopy, most patients receive intravenous sedation to help them remain comfortable for the duration of the procedure. The colonoscope (a long, thin, and flexible instrument that provides magnified views of the colon and rectum) is inserted via the rectum and advanced to the first portion of the colon where it connects to the end of the small intestine. All polyps or other abnormalities identified during the colonoscopy will be removed and/or biopsied and sent for analysis.

COLON POLYPS REMOVAL



For most patients, the entire procedure takes less than an hour. After the colonoscopy, some patients may experience slight discomfort in the form of abdominal cramping and “gas pains,” though this quickly resolves by passing any gas/air that was added inside the body during the procedure. In many cases, patients do not recall specifics of the procedure itself due to the sedation. It is important to have the individual who will be taking the patient home discuss discharge instructions with the physician and nurse before discharge.

Following a colonoscopy, patients usually resume their regular diet. Resumption of pre-procedure medications will be determined by the physician. Restrictions for driving and activity levels apply when intravenous medications are given to sedate patients prior to the procedure. Most patients are able to resume normal activity in the morning following the colonoscopy.

WHAT ARE THE BENEFITS OF A COLONOSCOPY?

A colonoscopy is the recommended means of colorectal cancer screening. The procedure allows for detection and removal of colon polyps that are prone to transform into cancer. The procedure is used also for investigation and diagnosis of other diseases that affect the intestines and can have a variety of symptoms.

WHAT ARE THE RISKS OF A COLONOSCOPY?

The colonoscopy is a safe procedure with minimal complications, occurring in less than 1% of patients. Infrequent complications include bleeding, perforation (a tear in the intestine), rare side effects from sedation, and inability to visualize the entire colon for polyps or other conditions. For anatomical reasons, the physician may deem it unsafe to complete the colonoscopy and therefore terminate the examination. In such instances, the physician will discuss with the patient whether additional or alternative examinations are needed.

WHAT IS A COLORECTAL SURGEON?

Colorectal surgeons are experts in the surgical and non-surgical treatment of diseases of the colon, rectum, and anus. They have completed advanced surgical training in the treatment of these diseases as well as full general surgical training. Board certified colorectal surgeons complete residencies in general surgery and colorectal surgery and pass intensive examinations conducted by the American Board of Surgery and the American Board of Colon and Rectal Surgery. These colorectal surgical experts are well-versed in the treatment of both benign and malignant diseases of the colon, rectum, and anus and are able to perform routine screening examinations and surgically treat conditions when necessary.



Source: American Society of Colon and Rectal Surgeons

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