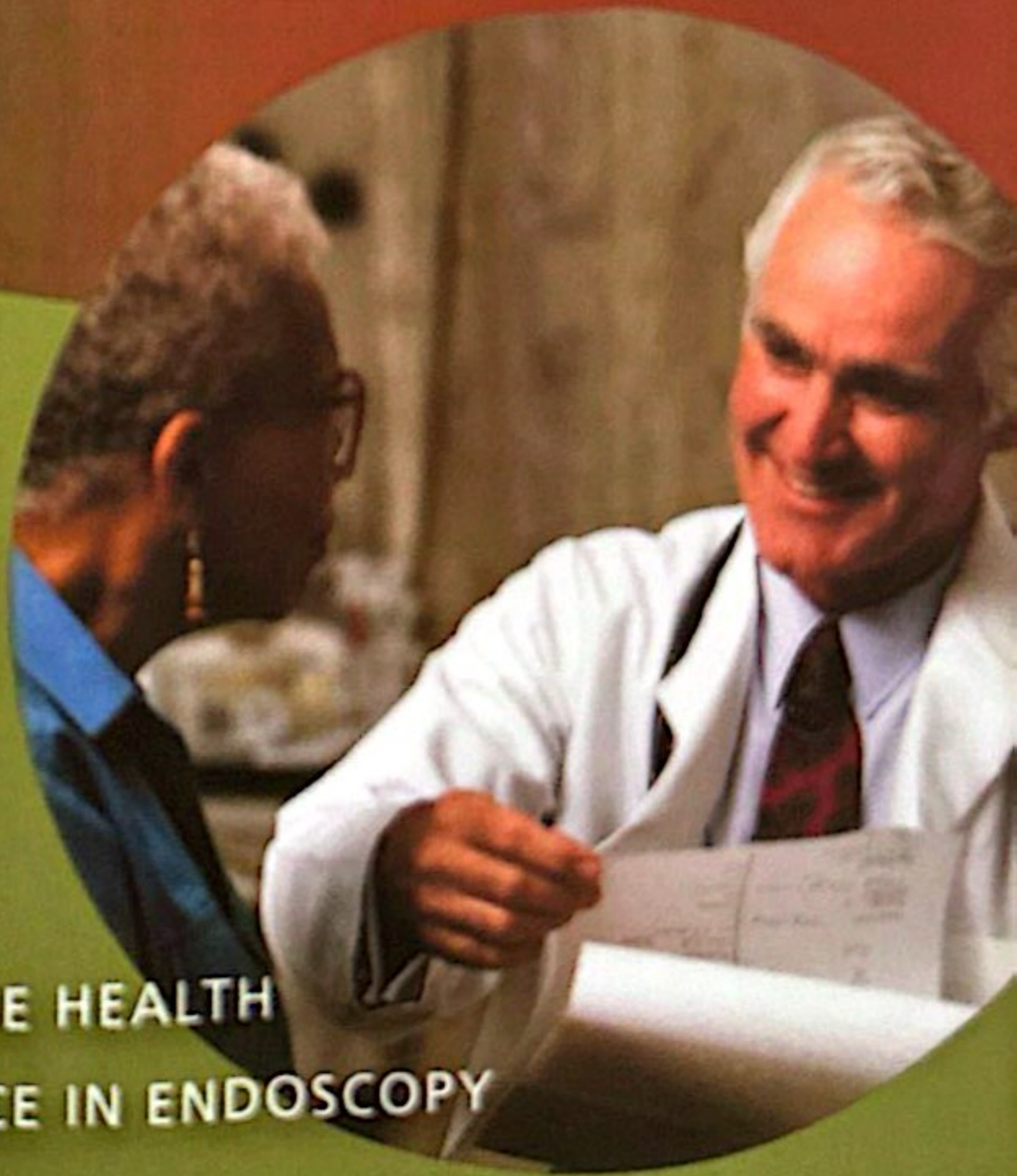




Understanding Colonoscopy



IMPROVING DIGESTIVE HEALTH
THROUGH EXCELLENCE IN ENDOSCOPY





A colonoscope is a medical device used by trained physicians to look inside the colon and rectum. The physician controls the movement of the flexible tube using the endoscope handle.

What is a colonoscopy?

Colonoscopy is an endoscopic procedure that lets your doctor examine the lining of your large intestine (colon) for abnormalities. During colonoscopy, your doctor inserts a thin, flexible tube into your rectum and slowly moves it through the entire length of the colon. This instrument, called a **colonoscope**, has a camera and light source and allows your doctor to look at the lining of your colon.

Why is colonoscopy recommended?

Colonoscopy is recommended as a screening test for colon cancer. Colon cancer is the third leading cause of cancer deaths in the United States. Every year, around 144,000 new cases of colon cancer are diagnosed in the United States. Roughly 52,000 people die from the disease each year. It has been estimated that increased awareness and screening would save at least 30,000 lives each year. For individuals with average risk factors, screening for colon cancer begins at age 50. When individuals are at higher risk, it usually begins sooner.

Colonoscopy may also be recommended by your doctor to evaluate for symptoms such as bleeding, abdominal pain, and chronic diarrhea.

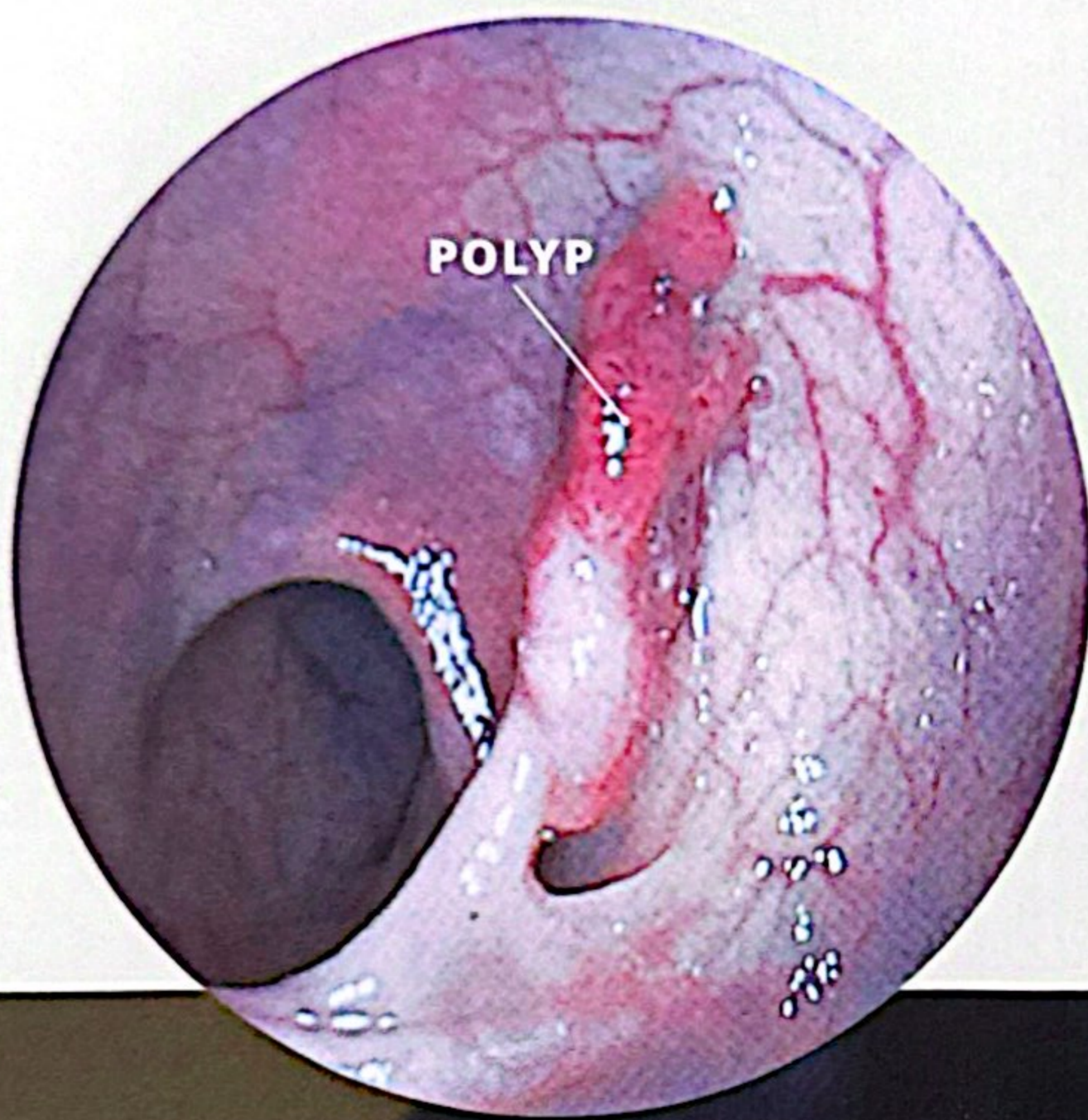


To screen for colon cancer, colonoscopy is almost always done on an outpatient basis. The procedure typically takes less than 45 minutes.

► Understanding Colonoscopy

What preparations are required before colonoscopy?

Before a colonoscopy, your doctor will explain how to change your diet and how to start your bowel preparation. You will also be instructed when to start fasting. In general, you will be on a clear liquid diet before the exam. Your doctor will also instruct



you to consume a solution that will empty your colon before the exam. This is called bowel preparation, or bowel prep. A clean and empty colon allows the physician to see more clearly, so this step is very important.

Before your exam, most medications can be continued as usual. Some medications can interfere with the bowel preparation. Tell your doctor about any medications you are taking, particularly insulin, aspirin products, arthritis medications, anticoagulants (blood thinners, such as warfarin or heparin), and other drugs that interfere with clotting such as clopidogrel (Plavix). Over-the-counter medications and supplements should not be taken the morning of the procedure.

Let your doctor know about any medical conditions you have, such as heart, kidney or lung disease. Also, be sure to mention any allergies you have to medications or latex.

Follow your doctor's instructions carefully to ensure a successful procedure.

What can I expect during a colonoscopy?

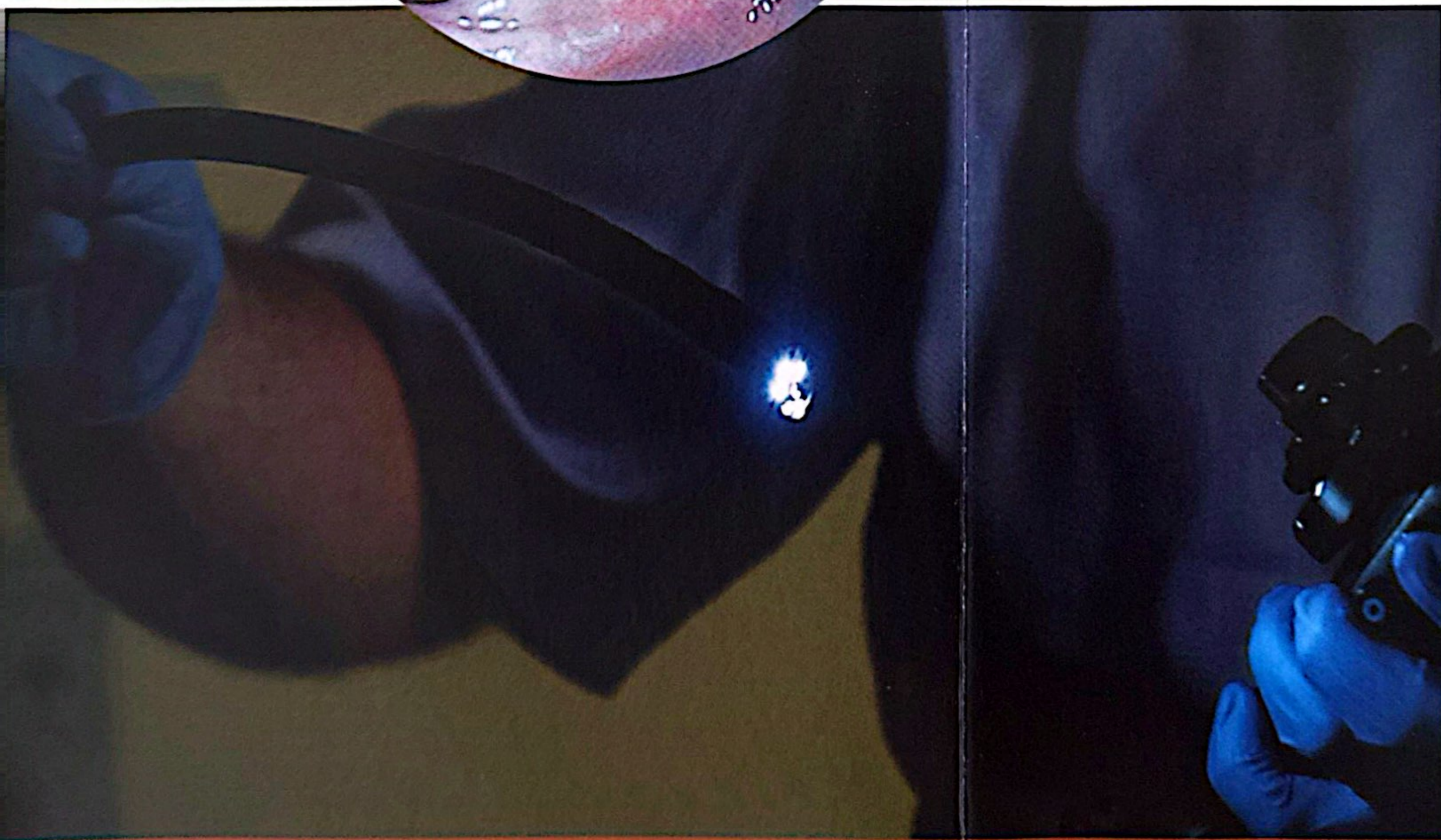
Right before the colonoscopy, you will receive medication to help you relax, make you sleepy and to minimize discomfort. You might feel abdominal pressure, bloating or cramping during the procedure.

You will lie on your left side or back during the exam. Your doctor will pass a long, flexible tube (a colonoscope) along the entire length of the large intestine (colon) and carefully examine the lining. The examination usually takes about 30 minutes.

In some cases, the doctor may not be able to move the colonoscope through the entire colon. If this happens, your doctor will tell you if any additional testing is necessary.

What if the colonoscopy shows something abnormal?

During the exam, if your doctor sees something that needs more evaluation, a small tool may be passed through the colonoscope to obtain a biopsy (tissue sample).



The endoscope is a thin, flexible tube with a camera and a light on the end of it. During the procedure, the physician looks at the lining of the colon wall in real time on a monitor.

During a colonoscopy, the physician passes the endoscope through your rectum and into the colon to examine the lining of the colon wall for abnormalities such as polyps.

Your doctor may find growths in the colon lining, called polyps. These growths will most likely be removed during the examination.

When a colonoscopy is being performed to look for sites of bleeding, the doctor might control bleeding by injecting medications, or by sealing off bleeding vessels with heat treatment (called cauterization), or by applying small metal clips. These procedures usually do not cause any pain.

What are polyps and why are they removed?

Polyps are abnormal growths in the colon lining that are usually benign (not cancer). They grow in different shapes and sizes. Your doctor will remove polyps to determine if they are benign or malignant (cancer). Certain polyps might become cancer if not treated. Removing polyps is an important way to prevent colorectal cancer. Colorectal cancer is cancer that forms in the colon or rectum.

How are polyps removed?

Your doctor will remove polyps with wire loops called snares or with biopsy instruments.

What can I expect after a colonoscopy?

You will be sent home after the procedure when most of the effects of the medications have worn off. Someone must accompany you home from

the procedure because of the medications used during the examination. You should not drive, operate machinery, or make legal decisions the day of the procedure to make sure that the effects of the medication have worn off. Even if you feel alert after the procedure, the medications can affect your judgment and reflexes for the rest of the day.

Some patients experience bloating or pass gas because of the air introduced during the examination. You can resume your usual diet unless you are instructed otherwise.

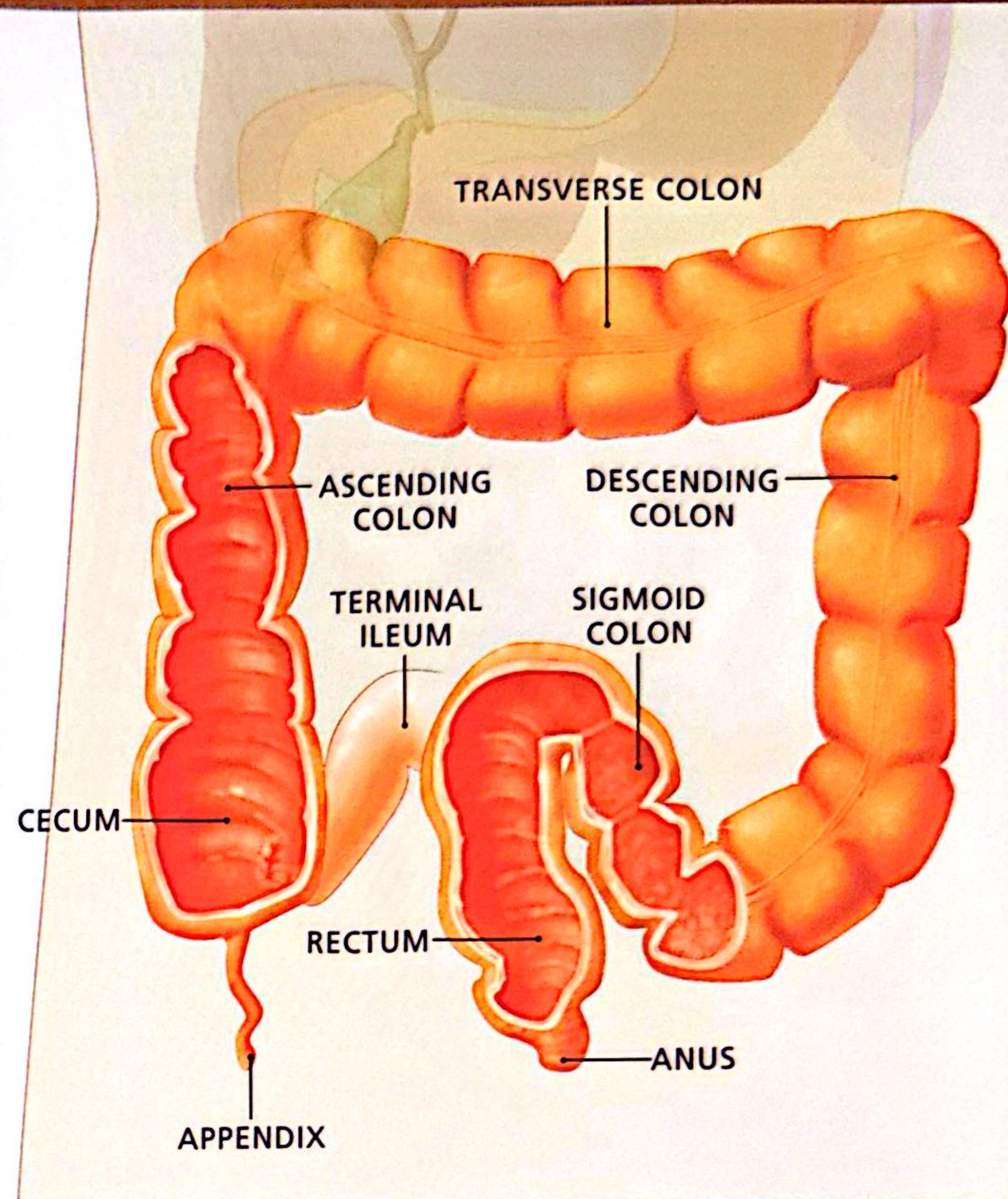
Your doctor generally can inform you of the preliminary results of the procedure that day, but the results of some tests, including biopsies, may take several days to return.

What are the possible complications of colonoscopy?

Colonoscopy is a common outpatient procedure. It does not require hospitalization. Complications from a colonoscopy are rare, but they can occur.

Perforation (a hole or tear in the gastrointestinal tract lining), is very rare, but can occur and may require surgery.

If a biopsy is taken or if a polyp is removed, the area may bleed, but it is usually minor. Bleeding usually stops on its own, but sometimes it requires treatment.



Some patients might have a change in heart rate, blood pressure or breathing from the medications.

Although complications after a colonoscopy are uncommon, it is important to recognize their early signs. Contact your doctor right away if you have a fever after the test or notice increasing abdominal pain, or bleeding, including black stools. If you have any concerns about a possible complication, it is always best to contact your doctor right away.

Important Reminder: This information is intended only to provide general guidance. It does not provide definitive medical advice. It is very important that you consult your doctor about your specific condition.

For more information, visit
www.asge.org

Since its founding in 1941, the American Society for Gastrointestinal Endoscopy (ASGE) has been dedicated to advancing patient care and digestive health by promoting excellence in gastrointestinal endoscopy. ASGE, with more than 12,000 members worldwide, promotes the highest standards for endoscopic training and practice, fosters endoscopic research, and is the foremost resource for endoscopic education.

This patient education brochure was developed by the Publications Committee of the American Society for Gastrointestinal Endoscopy. This information is the opinion of and provided by the American Society for Gastrointestinal Endoscopy.



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Funding for this brochure is being provided
by Takeda Pharmaceuticals U.S.A., Inc.