

Frequently Asked Questions About Colonoscopy

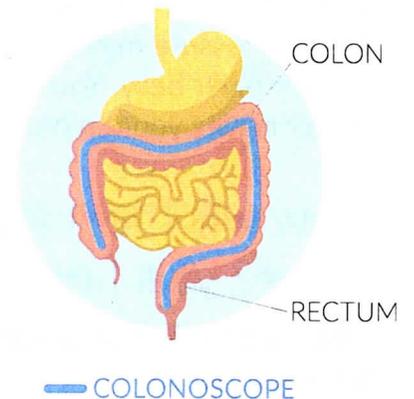
What is a colonoscopy?

A colonoscopy is a screening test used to look for colorectal cancer. It lets a doctor see the inside of the entire colon and rectum. The doctor is looking for polyps or abnormal areas which could be an early sign of cancer. Polyps are small growths that over time can become cancer.

The doctor uses a thin, flexible, lighted tube that has a tiny video camera on the end. This tube, called a *colonoscope*, is eased inside the rectum and colon, and sends pictures to a screen. Small amounts of air are pumped into the colon to keep it open and to let the doctor see clearly.

The exam takes about 30 minutes, but may take longer if a polyp is found and removed. Most people are given a sedating medicine to help them relax and sometimes sleep while the test is done. You'll need to plan on having someone take you home after the exam.

Your health care provider decides how often you need this test. It is usually once every 10 years, unless you're at a higher risk for colorectal cancer or if a polyp was found. It's important for you to talk with your primary care physician about your risk for colorectal cancer. This will help you know which guidelines you should follow for testing, and whether you need to start testing before age 50.



How do I get ready for a colonoscopy?

Before the procedure, you'll need to clean out your colon (often called the *bowel prep*). If you can choose a day for your exam, pick one that will make it easy for you to be at home the day or evening before the test, when you do the bowel prep. To empty your colon, your doctor may ask you to:

Follow a special diet the day before the exam.

Typically, you won't be able to eat solid food the day before. Drinks may be limited to clear liquids. Avoid red liquids, which can be confused with blood during the procedure.

Take a laxative. Your doctor may suggest taking a laxative, in either pill form or liquid form. You may be instructed to take the laxative the night before and possibly the morning of your colonoscopy.

Use an enema kit. In some cases, you may need to use an over-the-counter enema kit — either the night before or a few hours before the exam.

Adjust your medications. Remind your doctor of all your prescription and over the counter medications at least a week before the exam. This is especially important if you have diabetes, high blood pressure, or heart problems.

Also tell your doctor if you take aspirin or other medications that thin the blood, such as warfarin (Coumadin) or medications used to reduce risk of blood clots or stroke (Xarelto, Pradaxa). You may need to adjust your dosages or stop taking the medications temporarily.

You'll get instructions from your provider's office in advance. Read them carefully since you may need to pick up items like soups, laxatives or enemas. **If any of the instructions are not clear, call the office and go over them step-by-step.**

Will the procedure hurt?
Will I be asleep?

Most people don't find the exam painful. You're given medicine to make you sleepy during a colonoscopy, so you typically don't feel anything. During the test, air is pumped into the cleaned-out colon to keep it open, so that doctors can get the best pictures. The air pressure may cause some discomfort in your lower belly. You'll feel better after the air leaves your colon.

Who will do the exam?
Will I be in a private room?

Colonoscopy is almost always done by a gastroenterologist (a doctor whose specialty is the digestive tract) or a surgeon. The test is done in a private area; it may be a hospital outpatient department, a clinic, an ambulatory surgery center, or a doctor's office. Privacy is very important. If you have concerns, talk with your physician about where and how the test will be done.

How will I feel afterward? Will I need someone to drive me home? Will I need to miss work?

Most people feel okay after a colonoscopy, just a bit woozy from the drugs. You might have some gas because of the air that was pumped into the bowel, which can cause cramping and discomfort. Because colonoscopy is usually done with drugs that make you sleepy, you will need someone to take you home afterward. Most people miss work the day of the test.

What if the doctor finds something?

If a small polyp is found, the doctor can remove it during the test. If the doctor sees a large polyp, a tumor, or anything else abnormal, a biopsy will be done. For the biopsy, the polyp or abnormal area is taken out through the colonoscope. It's sent to a lab where it's checked for cancer or pre-cancer cells.

Why is this test so important?

Colorectal cancer screening helps save lives. Removing polyps can help prevent colorectal cancer from ever starting. Cancers found in an early stage, while they are small and before they have spread, are easier to treat. Often, people don't get the recommended screening tests, so the cancer can grow and spread without being noticed. Early on, colorectal cancer usually doesn't cause any noticeable symptoms. By the time people do have symptoms, the cancer is advanced and harder to treat.

Regular screening is the best way to find colon and rectal cancers in the early stages. Talk to your primary care physician to understand your risk and the best screening plan for you.



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