



Understanding Upper Endoscopy

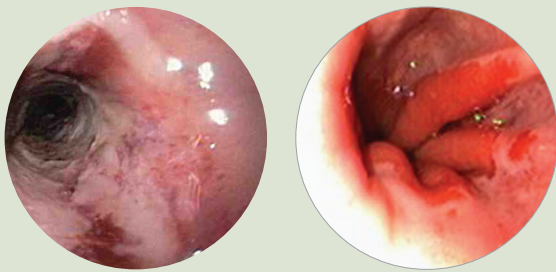
IMPROVING DIGESTIVE
HEALTH THROUGH
EXCELLENCE IN
ENDOSCOPY



What is upper endoscopy?

Upper endoscopy is a procedure that lets your doctor examine the lining of the upper part of your gastrointestinal tract, which includes the esophagus, stomach and duodenum (the first portion of the small intestine).

Your doctor will use a thin, flexible tube called an **endoscope**, which has a camera and light source. Images from the camera appear on a video monitor. A variety of instruments can be passed through the endoscope to diagnose and treat any abnormal findings.



Upper endoscopy enables the doctor to view the lining of the upper gastrointestinal tract including the esophagus, shown here in two views.

Why is upper endoscopy done?

Upper endoscopy helps your doctor identify and treat causes of symptoms such as upper abdominal pain, heartburn, bleeding, nausea, vomiting, weight loss or difficulty swallowing. Your doctor might use upper endoscopy to obtain biopsies (tissue samples) to identify benign (non-cancerous) or malignant (cancerous) tissue.

During an upper endoscopy, your doctor can pass instruments through the endoscope to perform therapies such as dilating (or stretching) a narrowed area, removing abnormal tissue or stopping bleeding.

What preparations are required?

An empty stomach allows for the best and safest examination, so you should have nothing to eat or drink, including water, for approximately six hours before the examination. Your doctor will tell you when you should start fasting as the timing can vary. Inform 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). Let your doctor know about any medical conditions you have, such as heart or lung disease. Also, be sure to mention any allergies you have to medications.

What can I expect during upper endoscopy?

Your doctor may numb your throat with a spray and you may receive medication to help you relax, make you sleepy and to minimize discomfort. You will then lie on your side, and a mouthpiece will be placed in your mouth. Your doctor will pass a flexible tube (endoscope) through your mouth, esophagus, stomach and duodenum (the first part of the small intestine). The instrument does not interfere with your ability to breathe. The examination generally takes less than 15 minutes.

An endoscope is a medical device used by expert physicians to look inside the digestive tract.

What can I expect after upper endoscopy?

You will be sent home after the procedure when most of the effects of the medications have worn off. Your throat might be a little sore, and you might feel bloated because of the air introduced into your stomach during the test. You can resume your usual diet unless you are instructed otherwise. 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.

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.

What are the possible complications of upper endoscopy?

Upper endoscopy is a routine outpatient procedure and does not require hospitalization. Although uncommon, complications can occur. Bleeding can occur at a biopsy site or where a polyp was removed, but it's usually minimal and rarely requires follow-up.



Perforation (a hole or tear in the gastrointestinal tract lining) is very rare, but can occur and may require surgery. Some patients might have a change in heart rate, blood pressure or breathing from the medications. You might have a slight sore throat for a day or so.

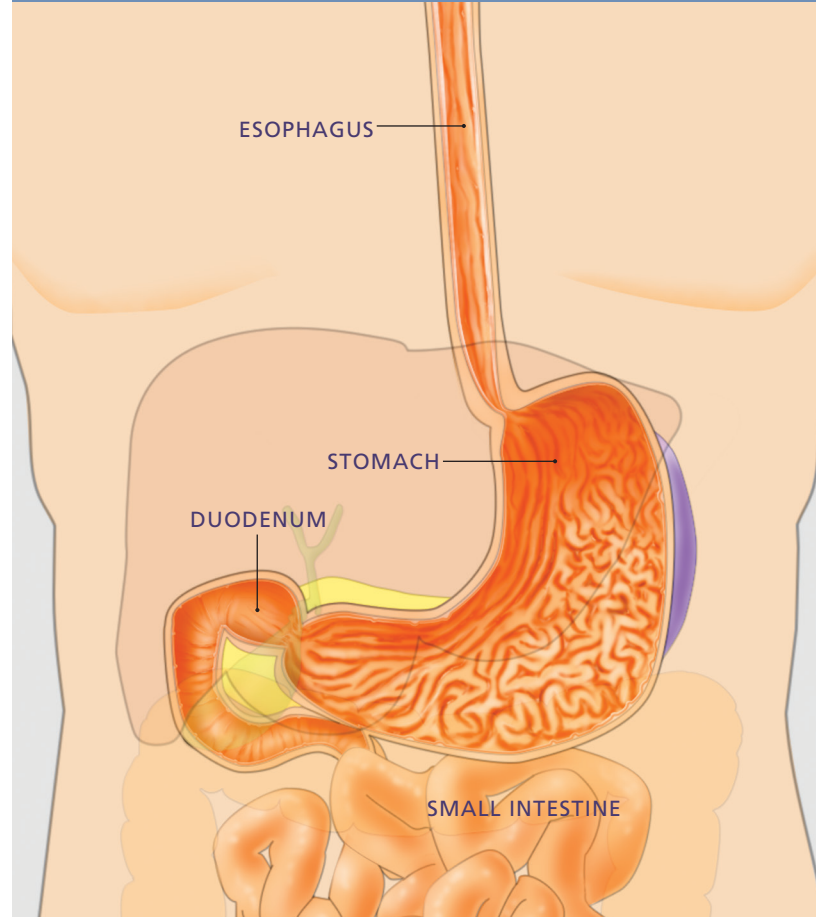
Although complications after upper endoscopy are uncommon, it is important to recognize early signs of possible complications. Contact your doctor immediately if you have a fever after the test or if you notice trouble swallowing or increasing throat, chest or abdominal pain, or bleeding, including black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

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There are other names used for upper endoscopy. These are the other names you might hear or see:

- upper GI endoscopy
- EGD
- endoscopy
- esophagogastroduodenoscopy
- panendoscopy

During upper endoscopy, your doctor examines the lining of the upper part of your gastrointestinal tract, which includes the esophagus, stomach and duodenum (the first portion of the small intestine).



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.



Since its founding in 1941, ASGE has been dedicated to advancing patient care and digestive health by promoting excellence in gastrointestinal endoscopy. This information is the opinion of and provided by the American Society for Gastrointestinal Endoscopy.

Gastrointestinal endoscopy helps patients through screening, diagnosis and treatment of digestive diseases. Visit www.asge.org to learn how you can support GI endoscopic research, education and public outreach through a donation to the ASGE Foundation.

For more information, visit www.asge.org or www.screen4coloncancer.org

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