



1. What is a Colonoscopy?

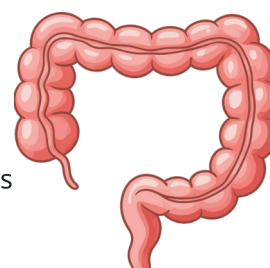
A colonoscopy is a procedure used to examine the lining of the large bowel (colon) to identify abnormalities such as polyps, inflammation, bleeding, or cancer.

During the procedure, Dr Sivasuthan uses a colonoscope, a long, thin, flexible tube with a small camera and light at its tip. The colonoscope is gently inserted through the back passage (anus) and guided through the rectum and colon, allowing the inside of the bowel to be viewed on a monitor. Air or carbon dioxide may be introduced to improve visibility, which can sometimes cause temporary bloating or cramping.

The colonoscope can also be used to perform treatments during the procedure. This may include removing polyps, taking biopsies (small tissue samples), or treating areas of bleeding. Biopsies allow tissue to be examined by a pathology laboratory and can help diagnose a range of bowel conditions.

Polyps are growths that arise from the lining of the bowel. While many are harmless, some can develop into bowel cancer over time. Removing polyps during colonoscopy is therefore an important way of preventing bowel cancer.

If a polyp is found, it can usually be removed during the procedure using a small wire loop passed through the colonoscope. In some cases, a small electric current may be used to assist with removal. If a source of bleeding is identified, it may also be treated during the procedure using medication, heat therapy, or small clips to stop the bleeding.



2. What are the risks?

In recommending the procedure, Dr Goutham Sivasuthan believes that the benefits to you from having the procedure exceed the risks involved. There are risks and possible complications associated with the procedure which can occur with all patients – these are set out below. There may also be additional risks and possible complications specific to your condition and circumstances which Dr Goutham Sivasuthan will discuss with you. If you have any further concerns, please ensure that you raise them with the Dr Goutham Sivasuthan prior to giving consent to the procedure.

All medical procedures carry some risks and potential complications. These risks may vary depending on each person's individual medical condition and circumstances. It is important that you discuss any specific concerns with Dr Goutham Sivasuthan before the procedure and ensure that any relevant risks are documented on your consent form.

Possible risks and complications may include, but are not limited to, the following:

Common risks and side effects

- Mild abdominal discomfort, bloating, or cramping for several days after the procedure. This usually improves with walking and movement as trapped air passes.
- Nausea or vomiting following the procedure or sedation.
- Light-headedness, faintness, or dizziness, particularly when first standing or moving around after the procedure.
- Headache.
- Pain, redness, or bruising at the site where sedation medication is given (usually in the hand or arm).
- Temporary muscle aches or general discomfort.
- Allergic reactions to medications administered during the procedure.

Less Common Risks and Complications

Less common complications may occur during or after a colonoscopy. These may include:

- Perforation (a tear or hole) in the bowel wall, which may allow bowel contents to leak into the abdomen. If this occurs, surgery may be required to repair the bowel.
- Significant bleeding, particularly if a polyp is removed. In some cases, further endoscopy, a blood transfusion, or surgery may be required to control the bleeding.

- Increased risk of bleeding if you are taking blood-thinning medications such as warfarin, aspirin, clopidogrel (Plavix, Iscover, Coplavix), prasugrel (Effient), dipyridamole (Persantin or Asasantin), ticagrelor (Brilinta), apixaban (Eliquis), dabigatran (Pradaxa), rivaroxaban (Xarelto), or certain supplements such as fish oil or turmeric.
- Incomplete examination of the bowel, which may occur if the bowel is not adequately prepared or if the colonoscope cannot be advanced through the entire colon.
- Missed polyps, growths, or bowel disease, which can occur in a small number of cases despite careful examination.
- Heart or lung complications, such as cardiac events or aspiration of stomach contents into the lungs, which may require urgent medical treatment.
- Conversion from sedation to a general anaesthetic, if required for safety or comfort during the procedure.
- Temporary nerve irritation or pressure injury, which may cause a numb or "dead arm" type sensation related to positioning during the procedure. This is usually temporary.
- Worsening of an existing medical condition related to the stress of the procedure or sedation

Rare Risks and Complications

- Rare complications may occur during or after a colonoscopy. These may include:
- Injury to nearby organs, such as the spleen. In rare cases, a tear to the splenic capsule or supporting ligaments may occur and could require hospital admission, blood transfusion, or surgery.
- Bacteraemia, which is an infection in the bloodstream that may require treatment with antibiotics.
- Stroke, which may result in neurological injury.
- Severe allergic reaction (anaphylaxis) to medications administered during the procedure.
- Death, although this is extremely rare.

Anaesthesia

This procedure is usually performed under sedation administered by an anaesthetist. Sedation carries its own risks and potential complications. Further information is provided in the anaesthesia information sheet supplied to you. If you have any concerns regarding sedation or anaesthesia, please discuss them with your doctor or anaesthetist.

If you have not received an anaesthesia information sheet, please request one prior to the procedure.

What are the risks of not having a colonoscopy?

If the procedure is not performed, the cause of your symptoms may remain undiagnosed. This may delay appropriate treatment and allow underlying conditions to progress.

Your choice

You are not required to proceed with the colonoscopy. If you decide not to have the procedure, you will not need to sign a consent form.

After the Procedure

Following the colonoscopy, you will remain in the recovery area for approximately two hours while the effects of the sedation wear off.

Your doctor will advise you when it is safe to eat and drink. In most cases, patients are able to resume fluids and light food shortly after the procedure.

You may experience some abdominal cramping or bloating due to air introduced into the bowel during the examination. This is common and usually settles once the air passes. Gentle movement and walking can help relieve these symptoms.

Your doctor will often discuss the findings of the colonoscopy with you after the procedure. In some cases, a follow-up appointment may be arranged to review the results in more detail, particularly if biopsies have been taken, as these require laboratory analysis.

Important precautions after sedation

Sedation can affect your judgment, coordination, and reaction time for up to 24 hours after the procedure. For your safety:

- Do not drive any vehicle or ride a bicycle. A responsible adult must take you home.
- Do not operate machinery or use potentially dangerous equipment.
- Do not make important decisions or sign legal documents.
- Do not drink alcohol or take recreational or mind-altering substances, as these may interact with the sedation medications.
- It is recommended that a responsible adult stay with you on the first night after your procedure.

When to seek urgent medical attention

Please contact the hospital or attend the nearest emergency department immediately if you experience any of the following:

- Severe or persistent abdominal pain
- Black, tarry bowel motions or significant bleeding from the back passage (more than approximately half a cup of blood)
- Fever or chills
- Severe chest or throat pain
- Redness, swelling, or increasing pain at the sedation injection site that persists beyond 48 hours.