

Basic Techniques of Endoscopy

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Introduction

Endoscopy is a nonsurgical technique that examines the digestive tract of a person. Your doctor can view photographs of your digestive tract on a colour TV monitor using an endoscope, a flexible tube with a light and camera connected to it.

An endoscope is introduced easily through the mouth and neck and into the oesophagus during an upper endoscopy, allowing the doctor to examine the oesophagus, stomach, and upper part of the small intestine.

Endoscopes can also be introduced through the rectum into the large intestine (colon) to check this part of the intestine. Depending on how far up the colon is inspected; this operation is referred to as sigmoidoscopy or colonoscopy. Endoscopic retrograde cholangiopancreatography, or ERCP, is a type of endoscopy that allows images of the pancreas, gallbladder, and related structures to be taken. Stent implantation and biopsies are also performed with ERCP.

Upper endoscopy and ultrasound examination are combined to collect images and information about various regions of the digestive system in endoscopic ultrasound, or EUS.

In addition, the doctor may use an endoscope to perform a biopsy (tissue removal) to check for illness. A digestive system ailment can also be treated with an endoscopy. The endoscope, for example, can be used to not only detect active

bleeding from an ulcer, but also to deliver devices that can halt the bleeding. Polyps in the colon can be removed via a scope to prevent colon cancer from developing.

■ Preparations for Endoscopy

The endoscopic operations are normally handled by gastroenterologists (gastroenterologists). Many of these treatments can also be performed by other specialists, such as gastrointestinal surgeons. The preparation of endoscopy includes:

Preparation of the Gut: Fasting for 6-8 hours before to the procedure is all that is required to examine the upper digestive tract (upper endoscopy or ERCP). Stool must be removed from the colon before it can be examined. As a result, a laxative or a combination of laxatives is administered the day before the procedure.

Sedation: A sedative is given for the majority of endoscopic exams. This improves the comfort of the person who is being examined. Relaxation and mild sleep are produced by the sedative, which is given as an injection into a vein. The method is frequently forgotten, if it is remembered at all. Patients wake up within an hour, but the medications' effects last longer, thus driving is not safe until the next day. Only very rare circumstances necessitate the use of general anesthesia (which renders you completely unconscious for a length of time) (in young children, and when very complex procedures are planned).

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