

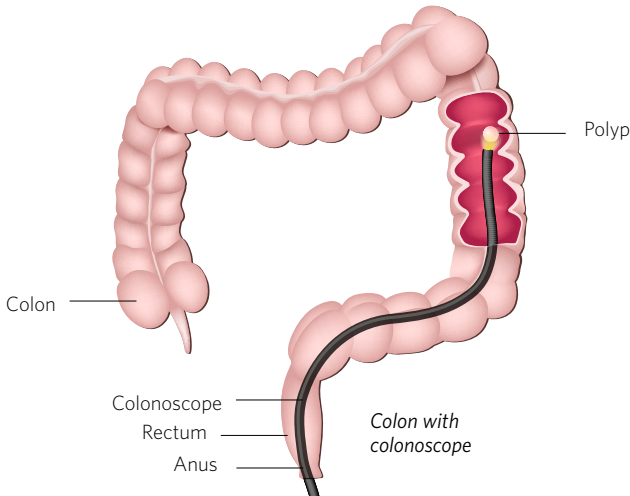
Colorectal
cancer is the
second most
common cancer
in Luxembourg

COLONOSCOPY INFORMATION

Prepare yourself for the examination!

Your doctor has advised you to have a colonoscopy done, and you will soon undergo this procedure. Please read this information document carefully so that you can be clear on how this medical procedure will be carried out. Your doctor is available to answer any further questions you may have.

WHAT IS A COLONOSCOPY?



A benign polyp may degenerate into cancer

A colonoscopy involves looking at the inside of your large intestine using a flexible tube equipped with a video camera, called an endoscope or a colonoscope. The aim of the examination is to detect polyps – little growths on the colon wall that can evolve over time, developing into colorectal cancer – and remove them during the same session.



Picture of a colorectal cancer



Picture of a polyp

Photos : Dr. Joseph Weber

It is vital that your bowels are empty and as clean as possible so that polyps can be detected, since they may only be a few millimetres in size. The success of the examination depends on your bowels being properly prepared.

WHY CHOOSE A COLONOSCOPY?

This is currently the benchmark examination for detecting anomalies of the colon. In particular, it makes it possible to detect polyps (benign lesions which could become cancerous) before they start bleeding. Removing polyps in order to stop them developing into tumours makes it possible to significantly reduce the chances of colon cancer developing. If it is found to be necessary, a doctor can perform a biopsy (the removal of a section of polyp or lesion for laboratory analysis) or proceed directly to the removal of the polyps.



Removal of a polyp

Colorectal cancer at an early stage does not always cause symptoms

Even with a thorough examination, small lesions can go unnoticed.

Furthermore, removing polyps does not prevent new ones from appearing later. Follow-up colonoscopies will therefore be necessary.

Colonoscopy make it possible to detect the majority of colon cancers!



WHERE ARE COLONOSCOPIES CARRIED OUT, AND BY WHOM?

Your doctor of choice will have given you a list of centres licensed by the Ministry of Health to participate in the Colorectal Cancer Screening Programme.

In each licensed centre, doctors specialising in gastroenterology or in internal medicine have been licensed by the Ministry of Health to carry out colonoscopies as part of the Colorectal Cancer Screening Programme.

Being licensed involves respecting criteria for quality and safety during colonoscopy procedures.

The licensing criteria for centres and doctors are available on www.plancancer.lu and www.sante.lu.

You are free to have your colonoscopy done in the licensed centre of your choice by the licensed doctor of your choice. If, before taking part in the screening programme, you have already had a colonoscopy done **by a licensed doctor** you can, if you wish, have your colonoscopy done by the same doctor this time.

However, if the doctor is not licensed as part of the screening programme, it is recommended that you choose a doctor from the list of licensed doctors. If you have any questions, please contact the Coordination Centre.

If you have
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please contact
the Coordination
Center at
247-85641

HOW TO MAKE A COLONOSCOPY APPOINTMENT?

As soon as you have chosen your licensed centre and licensed doctor, make an appointment for your colonoscopy, **specifying that it is to be carried out as part of colorectal cancer screening.**

If you are having a colonoscopy further to an abnormal result in the test checking for blood in your stools, make this clear to the person booking your appointment, so that your colonoscopy can be carried out within 30 days if possible.

When you are making your appointment, have your health insurance card to hand, so that you can provide the necessary details (surname, first name, health insurance number).

The licensed centre or licensed doctor will send or give you a card with the date and the time of the appointment, as well as a prescription to collect the bowel preparation product from a pharmacy. You will also receive instructions on how to drink this preparation.

WHICH DOCUMENTS SHOULD YOU TAKE TO YOUR APPOINTMENT?

- 1 The colonoscopy prescription, signed by your doctor
- 2 Your health insurance card
- 3 The consent form, which you will have read and signed

PRECAUTIONS TO BE TAKEN BEFORE UNDERGOING A COLONOSCOPY

If you are taking medication such as anticoagulants (e.g. Clexane®, Sintrom®, Plavix® etc.), aspirin or anti-inflammatories (e.g. Diclofénac®, Celebrex®, Arcoxia®), Insulin etc., please discuss this with your doctor at least two weeks before your colonoscopy appointment so that s/he can adapt your treatment before the examination if necessary, according to the state of your health.

! **Don't forget to inform your doctor about any medication you are taking, any allergies and illnesses you are suffering from, especially if you suffer from cardiac or eye diseases, renal insufficiency or juvenile onset diabetes.**

WHAT IS THE BEST WAY TO PREPARE BEFORE UNDERGOING A COLONOSCOPY?

For optimal quality and safety during the examination, it is essential that your colon is perfectly clean.

In order to eliminate any residue present in the bowel, you will need to adhere to a special diet for 3 days prior to undergoing the examination and drink a liquid preparation that will be prescribed to you by your doctor and that you will obtain from a pharmacy.



IN PRACTICE

1 The low-residue diet to follow for 3 days prior to the procedure:

Do not eat food containing fibre, cereal, seeds or pips. During the examination, any seeds caught up in the cleansing fluid remaining in your bowel could block the endoscope's suction channel, forcing the doctor to interrupt the colonoscopy.

Forbidden food: fruit and vegetables (neither cooked nor raw) and especially those containing seeds such as kiwis, tomatoes, grapes and cucumbers, etc. In the same way, avoid food containing seeds such as muesli, wholemeal bread or jam which contains seeds.

Authorised food: white meat and fish, eggs, white bread, pasta, white rice, potatoes and dairy produce such as milk, cheese or plain yoghurt.

2 Diet to follow the day before the procedure:

The day before your colonoscopy, you must have a light meal at lunchtime (containing no cereal products), such as: clear broth, white bread with plain cream cheese or seedless jams or honey, white rice, noodles, plain yoghurt or pudding not containing cereals.

Drink only: coffee, tea or still water and avoid fruit juice containing pulp.

If **your colonoscopy is taking place the following morning**, you cannot have an evening meal the day before.

If **your colonoscopy is taking place the following afternoon**, you may eat a light meal containing no cereal products the evening before, such as: clear broth, white bread with plain cream cheese or seedless jams or honey, white rice, noodles, plain yoghurt or pudding not containing cereals.

3 Preparing your colon for bowel cleansing:

Cleansing your colon in order to prepare your bowel is done with a **preparation taken orally** called Macrogol, which is a type of Polyethylene glycol. It is a laxative with a salty taste due to the electrolytes (salts) it contains. The electrolytes prevent the loss of sodium, potassium or water during preparation of the bowel. These salts do not have a significant effect on your blood pressure.



If you suffer from decompensated heart or renal failure or if you are allergic to one of the components, you must let the doctor who will be carrying out your colonoscopy know. S/he will then make sure you drink a bowel preparation that is suitable for you.

The preparation, which contains an active molecule (Macrogol), exists in the form of several different pharmaceutical products: Klean Prep®, Moviprep®, Colofort®, and Endofalk®.

The doctor who will carry out your colonoscopy will select one of these products. Generally these are sachets of powder to be dissolved in **still water**. S/he will give you instructions for preparing and drinking the product along with the prescription for buying the product in a pharmacy.

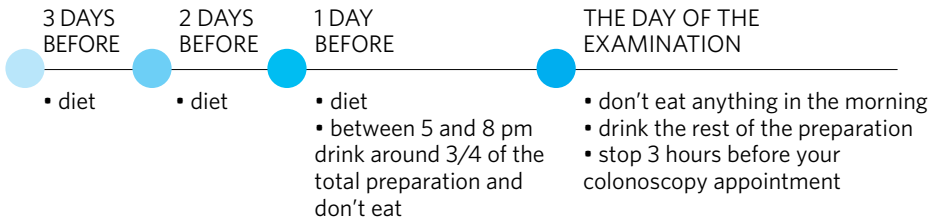
Before preparing the liquid preparation, read the instructions and note the contraindications and the side effects. If any of the contraindications concern you, call your doctor or the doctor you have chosen to carry out the colonoscopy to ask for advice.

Instructions to follow: The preparation liquid is taken differently depending on whether the procedure is planned for the morning or the afternoon.

- Once you start to drink the preparation, you can no longer eat.
- Ask your doctor about your medication: generally, do not take any medication just before starting to drink the preparation because they will pass quickly through your digestive system and will not be absorbed. This will make them ineffective. You should therefore take them at least 2 hours before starting to drink the preparation or 2 hours after finishing the final litre.

A. IF YOUR COLONOSCOPY IS CARRIED OUT IN THE MORNING

= the preparation is taken on two different days



- **The day before the procedure, starting at around 5 pm**, drink the preparation between 5 pm and 8 pm if possible (around $\frac{3}{4}$ of the total preparation). Generally, you will want to empty your bowel after 1 or 2 hours over the course of a period of 4 to 5 hours, depending how long it takes to ingest the product. You should therefore remain in the vicinity of a toilet. If you start drinking at 5 pm, **the preparation procedure will be finished at around 10 pm**. You can start drinking the preparation later but at the risk of spending an entire evening and the first part of the night needing to go to the toilet.
- On the morning of the procedure, drink the rest of the preparation (around $\frac{1}{4}$ of the total preparation) and finish it 3 hours before the time of your colonoscopy appointment. In this way, remaining stools from the night will be eliminated from your system before the colonoscopy.

B. IF YOUR COLONOSCOPY IS CARRIED OUT IN THE AFTERNOON

= the preparation is taken on one single day



Start drinking the preparation from around 8 am on the day your procedure is due to take place.

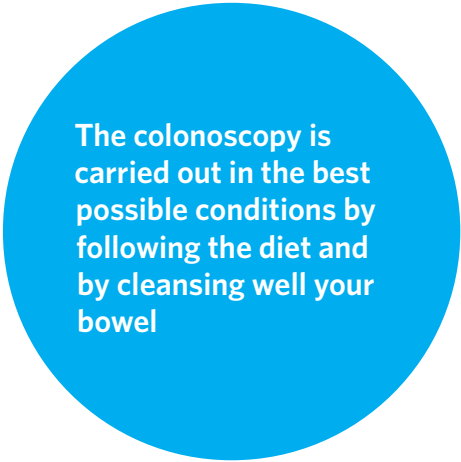
Dissolve the contents of each sachet in one litre of still water and **drink the preparation** if possible by 12 pm. Generally, you will want to empty your bowel after 1 or 2 hours over the course of a period of 4 to 5 hours, depending how long it takes to ingest the product. Remain in the proximity of a toilet.

4 Practical advice for optimising tolerance of the preparation

- The preparation is nicer to drink if it is **cold**. Prepare it in advance and put it in the refrigerator.
- If the salty vanilla taste bothers you, you can add flavoured **syrup** to the preparation (e.g. mint, grenadine, lemon, etc.).
- You can mask the flavour by sucking on a **strong sweet**.
- If you feel nauseous, **divide** the drinking sessions up further.
- In order to avoid the skin around the anus being irritated by repeatedly passing liquid stools, protect the skin with **cream**.
- If you have difficulty tolerating the preparation, contact the centre where your colonoscopy is going to be carried out to ask for advice. If the problem persists and you are unable to follow the procedure correctly, contact the doctor you have chosen to carry out the colonoscopy to discuss an alternative method of preparation.

5 If your bowel is not properly prepared

If faecal matter remains in your bowel, the doctor will not be able to examine your intestinal wall properly and will not be able to see if there are polyps that need to be removed. S/he will therefore decide to stop your colonoscopy and will suggest that you return on a different date after carrying out a full preparation. Adhering to the diet and cleansing your bowel will ensure that your colonoscopy is carried out in the best possible conditions.



The colonoscopy is carried out in the best possible conditions by following the diet and by cleansing well your bowel


HOW THE PROCEDURE IS CARRIED OUT

During the procedure you will be lying on your side or on your back. The endoscope (a flexible device equipped with a camera) will be introduced via your anus.

The colonoscopy will last for around 20 minutes. A tranquiliser can be administered in order to improve tolerance and make the examination easier. During the procedure, CO₂ gas will be pumped in to smooth out the colon wall so it is easier to see.

After the procedure, air left behind in the colon can cause temporary bloating. If you feel any pain once you return home, you should contact the endoscopy department as soon as possible on the telephone number that will be provided to you. Outside working hours, contact the emergency service at the hospital on duty.

If you would like to have the examination done under heavy sedation or general anaesthetic, you will need to have a specialist consultation with an anaesthetist doctor beforehand. Please precise this when you take your appointment.



The colonoscopy
will last at about
20 minutes

POST-COLONOSCOPY MONITORING

If you have not been sedated in order to undergo your colonoscopy, you can leave right after your examination and go to work.

If you have been sedated or had a general anaesthetic, you will need to stay in the monitoring room after the examination, usually for between 1 and 3 hours, before being able to leave. It may be necessary to monitor you for longer if you have had any polypectomies (polyp removals). The doctor will decide how long you need to be monitored for.

If you take tranquilisers or undergo heavy sedation or a general anaesthetic, you will not be able to drive. You will need to be accompanied by someone who can drive you home.



**Complications
of colonoscopy
are rare**

THE RISKS AND COMPLICATIONS INVOLVED

Any medical procedure, even where competence and safety conditions are in line with current scientific data and applicable regulations, carries risks of complications.

Complications related to colonoscopies are rare.

- Perforation of the bowel, a serious complication related to colonoscopies, is very rare, but usually requires urgent surgical intervention.
- In exceptional cases, major haemorrhaging might occur following a polypectomy. It may be more likely where the patient has an existing tendency to haemorrhage or is taking anticoagulant medication. An endoscopic or surgical intervention and/or transfusions might be necessary.
- Other complications can arise but remain exceptionally rare, such as cardio-vascular or respiratory problems, or an infection. The risks of infections are reduced to a maximum due to the current disinfection procedures conducted after each procedure and due to the single use devices during the removal of polyps or lesions.

Complications normally arise immediately after a colonoscopy procedure, but can sometimes occur in the following days.



If bleeding, abdominal pain, fever or other abnormal symptoms occur, even in the days following the examination, contact the doctor who carried out your colonoscopy as soon as possible or go to the hospital emergency department.

HYGIENE AND SAFETY

In order to guarantee your safety, the hospital facility and the doctor that you have chosen for your colonoscopy respect strict hygiene and safety standards, in particular concerning the cleaning and disinfection of the colonoscope. They are committed to using disposable equipment for the removal of polyps or cancerous lesions.

CONSENT

Before undergoing your colonoscopy, you will be asked to sign an informed consent document which you will give to the doctor you have chosen to carry out the procedure. In signing the document, you acknowledge that you have received information on the colonoscopy, that you have been able to ask your doctor questions and that you have understood the advantages and risks of the procedure.

CONTRIBUTING TO THE COST OF THE COLONOSCOPY

Your financial fee for the colonoscopy examination will include the following:

- Part-payment (60%) at the pharmacy for the bowel preparation product; the remaining cost will be paid for by your health insurance company.
- If you undergo the colonoscopy without sedation, the doctor will ask you to pay for the examination and you will then be reimbursed by your health insurance company. If your colonoscopy is carried out under heavy sedation or a general anaesthesia, the doctor can make the payment as a third party, and the hospital will ask you to contribute towards the cost.



**If you have
questions, please
contact the
Coordination Center
at 247-85641**

AIMS OF THE SCREENING PROGRAMME

The screening programme aims to

- 1 reduce the number of deaths from colorectal cancer
- 2 detect colorectal cancer at an early stage in order to be able to treat patients less aggressively
- 3 prevent cancer by removing polyps

Governance of the screening programme

The Ministry of Health is the public authority responsible for implementing the Colorectal Cancer Screening Programme, for its ex-post evaluation and for processing data of a personal nature. This programme is run in partnership with the Caisse Nationale de Santé (CNS - d'Gesondheetskeess).

In practice, the screening programme will be managed and implemented by the Coordination Centre for Cancer Screening Programmes of the Ministry of Health.

Personal data

The doctor who carries out your colonoscopy and the laboratory which analyses the samples will transmit the personal and medical data relative to your colonoscopy, including the results of the examination, to your chosen doctor and also to the doctor in charge of the Colorectal Cancer Screening Programme, to ensure that your screening is properly completed. This data will then be assigned a pseudonym and processed in conditions that respect its confidentiality so that the global efficiency of the screening programme can be assessed and the comparison with the national cancer register can be carried out.

If you undergo a colonoscopy between two screening sessions, the Caisse Nationale de Santé will provide the doctor in charge of the screening programme with certain data relative to this examination (date, place, prescribing doctor and operating doctor). This will make it possible to adapt the frequency of your screening.

In accordance with the law of 2 August 2002 relative to the protection of persons with regard to the processing of personal data, you retain the right to access and rectify your data and to refuse to have your data processed. For this, you simply have to send your request to the Coordination Centre for Cancer Screening Programmes.

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"I AM TAKING PART IN THE NATIONAL COLORECTAL CANCER SCREENING PROGRAMME"



For additional information please contact the Centre or visit our websites:

**Centre de coordination des
programmes de dépistage des cancers**

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