What is a Gastroscopy?

Gastroscopy lets your specialist examine the lining of the upper part of your gastrointestinal tract, which includes the oesophagus, stomach and duodenum (first part of the small intestine). Your doctor will use a thin, flexible tube called an endoscope, which has its own lens and light source, and will view the images on a video monitor. This is also referred to as upper GI endoscopy or oesophagogastroduodenoscopy (OGD).

Why is a Gastroscopy done?

Gastroscopy helps your doctor evaluate various symptoms that include persistent upper abdominal pain, nausea, vomiting or difficulty swallowing. It is an excellent test for finding and treating the cause of bleeding from the upper gastrointestinal tract. It is also more accurate than X-rays or barium tests for detecting inflammation, ulcers and tumors of the oesophagus, stomach and duodenum.

Your specialist may use upper endoscopy to obtain a biopsy (small tissue samples). A biopsy is done for a number of reasons but most commonly to diagnose Coeliac disease or perform a test for Helicobacter pylori, which is a bacterium that is a common cause of duodenal and gastric ulcers. Occasionally a biopsy is done to distinguish between benign and malignant (cancerous) tissues. Gastroscopy is also used to treat conditions of the upper gastrointestinal tract. Your doctor can pass instruments through the endoscope to directly treat many abnormalities with little or no discomfort. For example, your doctor might stretch a narrowed area, remove polyps (usually benign growths) or stop bleeding.

How should I prepare for the procedure?

The best and safest way to do the test is on an empty stomach so you should have nothing to eat or drink, including water, for approximately six hours before the examination. If you are on some essential medications you may be able to take them with small sips of water only after consulting your specialist performing the gastroscopy.

It is very important you tell your doctor up to 5 days in advance about any medications you take; you might need to adjust your usual dose for the examination or even stop certain medications like iron tablets or blood thinning medications like warfarin. Discuss any allergies to medications as well as medical conditions, such as heart or lung disease.

Also, alert your doctor if you require antibiotics prior to undergoing dental procedures, because you might need antibiotics prior to Gastroscopy as well.

What can I expect during a Gastroscopy?

Before your examination a Nurse will ask you some questions about your health and enquire about medications you are taking.

Gastroscopy is performed in a fully equipped theatre. You may have your gastroscopy with either a local anaesthetic spray to numb the back of your throat or with sedation to make you sleepy. If you have sedation you will be given additional oxygen into your nostrils throughout the procedure and a probe will be placed on your finger to monitor your blood oxygen levels and your heart rate. You will lie on your side and your specialist will pass the endoscope through your mouth and into the oesophagus, stomach and duodenum. The endoscope doesn’t interfere with your breathing. The procedure generally takes about 10 minutes but could be longer particularly if you require any endoscopic treatment during the test.
What is a Gastroscopy?

What happens after the Gastroscopy?

You will be taken on your bed to the recovery room where you will be monitored until the effects of the medication have worn off. Your doctor will then explain the results of the examination to you, although you will have to wait up to 5 days for the results of any biopsies performed. If you have had a sedative, even if you feel alert after the procedure, your judgement and reflexes may be impaired for the rest of the day. It is therefore important that someone drives you home and remains with you for the rest of the day. It is also unsafe for you to drive or operate machinery, make any important decisions or drink any alcohol for 24 hours.

What are possible complications of Gastroscopy?

Although complications can occur they are rare when doctors who are specially trained and experienced in this procedure perform the test. A mild sore throat maybe experienced for a day or so. Bleeding can occur at a biopsy site or where a polyp was removed, but it’s usually minimal and rarely requires follow-up. Other complications include a reaction to the sedative used, perforation (tear in the gastrointestinal tract lining), and complications from underlying heart or lung diseases. It’s important to recognize early signs of possible complications. If you have a fever after the test, trouble swallowing or increasing throat, chest or abdominal pain, tell your doctor immediately.

Any other questions?

If you still have any questions about the procedure, the reasons for doing it, any alternative tests, the costs, or insurance coverage do not hesitate to speak to the staff at Gastroenterology and Endoscopy Specialists (03 378 6236).

Our endoscopists are highly trained specialists and welcome your questions regarding the procedure. Our endoscopists are all members of Quality Endoscopy New Zealand, your guarantee of the highest quality endoscopy.