

Understanding OGD

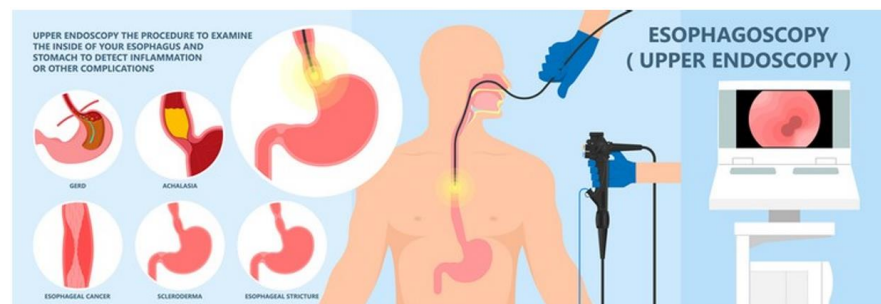
Oesophageal Gastroscopy Duodenoscopy

What is OGD?

A procedure usually performed under Sedation/General Anesthesia that enables the endoscopist to examine the lining of the upper part of your gastrointestinal tract, which includes the Esophagus (swallowing tube), stomach and duodenum (first portion of small intestine). The endoscopist 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.

When is OGD done?

- Abdominal Pain
- Gastric Reflux
- Difficulty or Pain in Swallowing
- Persistent Nausea or Vomiting
- Anemia
- Bleeding in upper Gastrointestinal Tract
- Unexplained Weight loss



How to prepare for OGD

The upper GI Tract must be empty before OGD. Generally, no eating or drinking is allowed for 4 to 8 hours before the procedure. Your endoscopist will be more specific about the time to begin fasting depending on the time of day that your test is scheduled.

Medication may need to be adjusted or avoided. It is best to inform your endoscopist of ALL your current medications as well as allergies to medication prior the procedure. Most medications can be continued as usual. Medication use such as aspirin, vitamin E, nonsteroidal anti-inflammatories, blood thinners and insulin should be discussed with your endoscopist prior the procedure. It is essential that you alert your endoscopist if you require antibiotics prior to undergoing detail procedures, since you may also require antibiotics prior OGD. Driving is not permitted for 12 to 24 hours after OGD to allow sedatives time to completely wear off.

What can be expected during the OGD?

You may have your throat sprayed with a local anaesthetic before the procedure begins and the given medication through a vein to help you relax. You will be laid on your side/back in a comfortable position as the endoscope is gently passed through your month and into your esophagus, stomach and duodenum. Air is introduced into your stomach during the procedure to allow a better view of the stomach lining. The procedure usually lasts 3-15 minutes. The endoscope does not interfere with your breathing. Most patients fall asleep during the procedure, and some people find it only slightly uncomfortable.

What happens after OGD?

You will be monitored in the endoscopy area for 1-2 hours until the effects of the sedatives have worn off. Your throat may be a little sore for a day or two. You may feel bloated immediately after the procedure because of the air that is introduced into your stomach during the examination. You will be able to resume your diet and take your routine medication after you leave the endoscopy area, unless otherwise instructed. Your endoscopist will usually inform you of your test results on the day of your procedure, unless biopsy samples were taken. These results take several days to return.

What are the potential complications?

OGD and biopsy are generally safe when performed by endoscopist who have had special training and are experienced in these endoscopic procedures. Complications are rare, however, they can occur. They include bleeding from the site of a biopsy or polypectomy or a tear(perforation) through the lining of the intestinal wall. Blood transfusion are rarely required. A reaction to the sedative can occur. Irritation to the vein that medication were given s uncommon, but may cause a tender lump lasting a few weeks. Warm moist towels will help relieve this discomfort. It is important for you to recognise the early signs of possible complications and to contact your endoscopist if you notice symptoms of difficulty swallowing, worsening throat pain, chest pains, severe abdominal pain, fevers, chills or rectal bleeding of more than one-half cup.



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Opening Hours

Monday-Friday: 8.30am-6pm

Saturday: 8.30am-1pm

Sunday & Public Holidays: Closed