



# A guide to...

## **Paediatric Gastroscopy**

### **Patient Information**

#### How to contact us

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Tel: 01923 244366

If you need this leaflet in another language, large print, Braille or audio version, please call **01923 217 198** or email **westherts.pals@nhs.net** 



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#### Paediatric Gastroenterology

#### What is Gastroscopy (Endoscopy)?

Gastroscopy (which is also called upper GI endoscopy or OGD) is a procedure which passes a flexible tube from the mouth to the stomach, through the food pipe (oesophagus) into the part of small intestine (duodenum). The tube has a camera which allows the person doing the gastroscopy to see the inner aspects of these parts on a screen.

It also involves taking a small piece of tissue sample (1-2 mm) from the inner lining which is called as biopsy which used to make a proper diagnosis of the condition.

It happens in one of our operation theatres in the main building (PMOK).



Picture of gastroscopy tube going to stomach

#### Before your gastroscopy?

As parents/guardians you will be asked to give consent for the procedure. Then you will be given a date and time for it and a confirmation letter will be posted to your address.

A week before to the procedure, a nurse from our Safari Day unit will call and go through questions about your child's wellbeing, immunisation status, past medical history and the use of regular medications etc.

#### What preparation is needed before the procedure?

Your child can eat and drink normally until the day of procedure.

- No food, formula or milk (or chewing gum) should be taken after **2** am on the morning of the procedure.
- No breast milk should be given after **4 am** on the morning of the procedure.
- Clear fluids only (water or very dilute squash) are allowed until 6 am.

Further fluid allowance will be advised by the ward staff on arrival at the hospital.

#### How does the procedure take?

You can expect to be at the hospital until late afternoon or early evening. It varies but usually the gastroscopy takes about 20 minutes. Your child will also need time to be prepared and to recover from the anaesthetic after the procedure.

#### Is the procedure painful?

The procedure is done under general anaesthesia (GA). On the day of the procedure, the ward nurse will admit the child and put an anaesthetic numbing cream on their hand. This is to allow a cannula (a small tube) to be inserted in the hand through which the general anaesthetic medication will be given. One of our anaesthetists will review the patient in the morning and put the patient to sleep before the procedure and make sure that they are comfortable.

Usually, one parent can stay with the child while the anaesthetist starts giving the injection and leaves the operation theatre before the start of the procedure.

#### What are the risks of general anaesthesia (GA)?

Some children may suffer from sickness or sore throat, and they are usually short lasting and there are medicines to treat them if necessary.

The other possible side effects are dental damage, headache, dizziness, reaction to anaesthetic medicines. There is also small risk that loose or wobbly teeth may be dislodged, so please inform the anaesthetic doctor if your child has loose or wobbly teeth. Any complications related to anaesthesia will be dealt with your anaesthetist. The anaesthetist can discuss these details during the pre-procedure call.

Serious problems are rare and most children recover quickly and they are soon back to normal after their procedure.

#### Are there any complications with the procedure?

Gastroscopy carries a small risk of bleeding (less than 1 in 100). A tear (perforation) is extremely rare (1 in 5,000). Your doctor will discuss this with you in detail before you give consent and the procedure is scheduled.

#### **Cancelling the procedure**

If for any reason your child is unable to attend the procedure and need to cancel the procedure, please inform the Safari Day Unit **as soon as possible**. (See telephone numbers below.)

#### After the procedure

Your child will be taken to a recovery area after the procedure to recover from the general anaesthesia. Once they have recovered, the nurse will call you to be with your child.

Once fully awake, your child will be allowed to drink and eat something if they are not feeling sick. Your child will need to eat and drink before they are discharged home.

Your child may feel bloated and have some crampy pain which usually settles over next 24 hours. Your child might be tired and little unsteady for around 24 hours after the procedure, so do not allow activities that could lead to a fall. Also, they may be grumpy for first few days after procedure which is a known side effect of the anaesthetic medicine.

For pain relief at home, you can give paracetamol every six hours for first 24 hours without exceeding the admissible dose. After that, as often as the child needs (without exceeding the maximum dose) to ensure that your child is eating and drinking.

If you think your child needs stronger pain relief, please call your GP for advice.

If you are concerned, or your child has any of the following symptoms, please bring your child to the emergency department.

- Severe pain
- Breathing difficulties
- Fever not responding to paracetamol
- Black, tar-like stools

Your child should be able to go back to the school 24 hours after the procedure.

#### When will I know the result?

The doctor who did the gastroscopy will be able to tell you what they were able to see before you go home, and they will discuss a plan for your child's further management.

The results of the biopsies are usually reported after 10-14 days. You will be telephoned with the result or seen in a clinic. A management plan will be sent to you and your GP confirming the findings of the procedure and any further treatment that may be necessary.

#### Important contact numbers

Safari Ward Tel: 01923 436694 - Monday to Friday 7am until 4pm

Day unit administrator Tel: 01923 217584 - Monday to Friday 7am until 3pm

**Starfish Ward nursing station** Tel: 01923 217357 - Out-of-hours, weekends and public holidays

Consultant's secretary Tel: 01442 287305 (Tuesday-Friday, 9am to 5pm)

Hospital switch board

Tel: 01923 244366

\* Published data from the Paediatric Clinical Outcome Research Initiative