What is a colonoscopy?
A colonoscopy allows your doctor to examine the lining of your colon (large intestine) using a colonoscope, a long, flexible fiber-optic tube about the thickness of a finger that has a miniature camera in the tip. The tube is inserted into the anus and is slowly advanced into the rectum and colon. The doctor uses the scope to examine the entire lower gastrointestinal tract for any abnormalities appearing on the x-ray and to remove polyps, if necessary. Air is introduced to inflate the colon, allowing the doctor to carefully examine the lining. If any suspicious or abnormal areas appear, they are photographed or tissue samples are taken for further study and examination. The procedure usually takes 30 to 60 minutes, or less, but may require additional time if any polyps are present.

Why a colonoscopy?
A colonoscopy is an important procedure used in the detection of colon cancer. Almost all colon cancers start as polyps (benign growth of colon) that later becomes cancerous. A colonoscopy can find what is causing symptoms such as rectal bleeding or changes in bowel habits that x-ray tests cannot. Barium enema shows just shadows and can miss cancers and small lesions. Before the colonoscopy, major abdominal surgery was the only way to explore the colon and remove polyps. Thanks to the colonoscope, most polyps and tumors can be removed early, safely, and without surgery.

What preparation is required?
To insure an effective and accurate procedure, the colon must be completely empty of waste material. Solid or opaque matter retained in the colon prolongs the colonoscopy and can reduce its effectiveness, making a repeat examination necessary.

Follow the colonoscopy preparation instructions carefully. Diet is a very important part of the cleansing process.

Can I take my current medications?
Most medications can be continued as usual, but some medications can interfere with the preparation or the examination. Inform your doctor about medications you’re taking, particularly aspirin products, arthritis medications, anticoagulants (blood thinners), insulin, or iron products. Also, be sure to mention allergies you have to medications.

Alert your doctor if you require antibiotics prior to dental procedures, because you might need antibiotics before a colonoscopy as well.

What happens during a colonoscopy?
To make you relaxed and sleepy, you will be given medication through a vein. While you are lying in a comfortable position, the colonoscope is inserted into the rectum and gently advanced through the colon while the lining is examined thoroughly. During the insertion and observation, you may be asked to change positions to assist the doctor in maneuvering the colonoscopy for optimal visualization. The colonoscope is then slowly withdrawn while the colon is again carefully examined.
FISHERS DIGESTIVE CARE
ANIL YAKHMI, M.D.

The procedure is well tolerated and rarely causes pain. If there is discomfort, it is very mild. Many patients fall asleep during the examination and my not, because of medications, even remember having the test done.

What if the colonoscopy shows something abnormal?
If your doctor thinks an area needs further evaluation, he or she might pass an instrument through the colonoscopy to obtain a biopsy (a sample of the colon lining) to be analyzed. Biopsies are used to identify many conditions, and your doctor might order one even if he or she doesn’t suspect cancer. If the colonoscopy is being performed to identify sites of bleeding, your doctor might control the bleeding through the colonoscope by injecting medications or by coagulation (sealing off bleeding vessels with heat treatment). Your doctor might also find polyps during colonoscopy, and he or she will most likely remove them during the examination. These procedures don’t usually cause any pain.

What are polyps and why are they removed?
Polyps are abnormal growths in the colon lining that are usually benign (noncancerous). They vary in size from a tiny dot to several inches. Your doctor can’t always tell a benign polyp from a malignant (cancerous) polyp by its outer appearance, so he or she might send removed polyps for analysis. Because cancer begins in polyps, removing them is an important means of preventing colorectal cancer.

How are polyps removed?
Your doctor might destroy tiny polyps by fulguration (burning) or by removing them with wire loops called snares or with biopsy instruments. Your doctor might use a technique called “snare polypectomy” to remove larger polyps. That technique involves passing a wire loop through the colonoscope and removing the polyp from the intestinal wall using an electrical current. You should feel no pain during the polypectomy.

What happens after a colonoscopy?
You will be kept in the recovery room until most of the effects of the medication have worn off. Due to the medication, you will not be able to drive yourself home, so please bring someone with you. An antidote may be administered to reverse the drowsiness produced by the sedative medication. Also you may feel bloated after the procedure because of the air introduced into the colon during the examination.

You may not remember all the details explained to you during or after the procedure. The doctor will talk to the person that is accompanying you regarding the finding of the colonoscopy. If you do not approve of this, please notify us prior to the procedure.

Do not return to work for the remainder of the day. Do not operate a motorized vehicle or machinery. Rest for at least two hours when you get home, as you may feel drowsy from the medication all day. Resume your previous medication dosage and time schedule unless otherwise instructed. You will be able to resume your regular diet and activities after the colonoscopy unless otherwise instructed. If you have a polyp removed, you may be on a liquid diet for twelve hours and restricted from lifting anything heavy for twenty-four hours. If a biopsy is taken we will discuss the results with you during your follow-up visit.

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What are the possible complications of a colonoscopy?
Colonoscopies are safe and very low risk. Most are free from complications and the benefits of the procedures greatly outweigh the risk. However, like any other effective diagnostic or therapeutic procedure, complications may occur.

Possible complications are perforation of the colon and heavy bleeding. A perforation of the colon involves injury to the bowel wall, but is quite rare. Persistent bleeding may require hospitalization. Contact Dr. Yakhmi immediately if any abdominal pain, bleeding or any other adverse effects are experienced after the procedure.