

UPPER ENDOSCOPY

Also called an EGD or gastroscopy, an upper endoscopy uses a thin scope with a light and camera at its tip, called an endoscope, to look inside the upper digestive system of the esophagus, stomach and the first part of the small intestine. The endoscope is passed through the mouth and down the throat to the esophagus. It may also have a small biopsy instrument to remove tissue that is then checked under a microscope for abnormalities.

What to Expect: During the Screening

The patient will be given a sedative, and a local anesthetic may be sprayed into the mouth to suppress the gag reflex when the endoscope is inserted. A mouth guard will be inserted to protect the patient's teeth as well as the endoscope. Dentures must be removed.

In most cases, an intravenous line will be inserted into the arm to administer the sedation and any medications that might be needed. The patient will lie on their left side, and, after the sedative has taken effect, the endoscope will be gently guided through the esophagus to the stomach and the beginning of the small intestine. Air will be introduced through the endoscope to enhance viewing. The lining of the esophagus, stomach and upper small intestine is examined, and biopsies can be performed at the same time.

After the test is complete, food and liquids will be restricted to prevent choking until the anesthetic wears off and the gag reflex returns.

The actual test lasts about 10 to 20 minutes. There may be a sensation of gas after the procedure. Biopsies cannot be felt. Because of the intravenous sedation, you likely will not feel any discomfort and may have no memory of the test.

What Can be Found?

An upper endoscopy can help determine causes for heartburn, the presence of hiatus hernias, the cause of abdominal pain, unexplained anemia, and the cause of swallowing difficulties, upper GI bleeding, and the presence of tumors or ulcers.

How to Prepare

The stomach must be empty for the procedure to be thorough and safe, so patients must fast about 6-12 hours before the test. Patients may also be told to stop aspirin and other blood-thinning medications for several days before the test. Patients should also arrange for someone to take them home because of the sedation during the procedure. The physician may give other special instructions.