

# COLONOSCOPY RISK STATEMENT INFORMATION SHEET

(Please read this information carefully, in conjunction with the procedure information)



## *What are the alternatives to colonoscopy?*

### **1. Barium enema**

This procedure involves an x-ray of the large bowel, and is an alternative method of examining the bowel. It does have fewer risks, but biopsies are unable to be taken and polyps cannot be removed. It also does not examine the rectum or lowest part of the bowel very accurately.

### **2. Virtual colonoscopy**

A CT scan of the abdomen with special software, enables a three dimensional image of the colon to be taken. This is not used as a routine and again does not enable biopsies to be taken or polyps removed.

*\*Please note – both alternatives require bowel preparation\**

## *What are the Risks of Colonoscopy?*

### **1. Incomplete colonoscopy**

On some occasions, the colonoscope is unable to be passed through the entire colon. This occurs in between 5% and 20% of cases depending upon your age and whether you have had previous pelvic or abdominal surgery. If this does occur, and it is felt important to examine the rest of the colon, then either you will have the rest of the colon examined by a virtual colonoscopy or a barium enema on the same or on a subsequent day. Generally, however, if at all possible by the end of the day of the procedure, the colon should have been adequately examined.

### **2. Missed lesions**

No medical test can be 100% accurate. Colonoscopies can miss lesions in the bowel in between 2% and 8% of cases. For serious lesions such as cancer, the chance is much less, but still present. For these reasons, it is recommended that all patients over the age of 50, and those with a family history of colorectal cancer perform a “faecal occult blood” test every year. Once you have had a colonoscopy, if you fall into one of these categories you should have the first of these tests performed one year after the colonoscopy. These test kits are available from your chemist or local doctor.

### **3. Perforation of the colon**

A perforation is when a hole or tear is made in the colon by the colonoscope. This is rare, occurring in 1 in 500 – 1000 cases. If it occurs, then it would be likely that an operation would be required to repair the damaged area. This would involve a stay in hospital for approximately 1 week.

### **4. Bleeding from the bowel**

Small amounts of blood are not uncommon after biopsies or polypectomy (removal of polyps). In 1 in 100 cases of polypectomy the bleeding may be sufficient enough to require transfusion.

**If you have read all of the information above and are satisfied that you understand it please sign and date this page and bring it with you to your appointment.**

If you have any questions related to this information sheet or your procedure, please telephone your doctor.

I have read and understand the information on this page.

.....  
Name

.....  
Date

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## A COMPREHENSIVE DIGESTIVE HEALTH SERVICE

Suite 604, Flinders Private Hospital Bedford Park, South Australia 5042 All Appointments: (08) 8276 9888 Fax: (08) 8276 5800	Level 1, Wakefield Clinic 270 Wakefield Street, Adelaide 5000 All Appointments: (08) 8359 2411 Fax: (08) 8359 2477
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