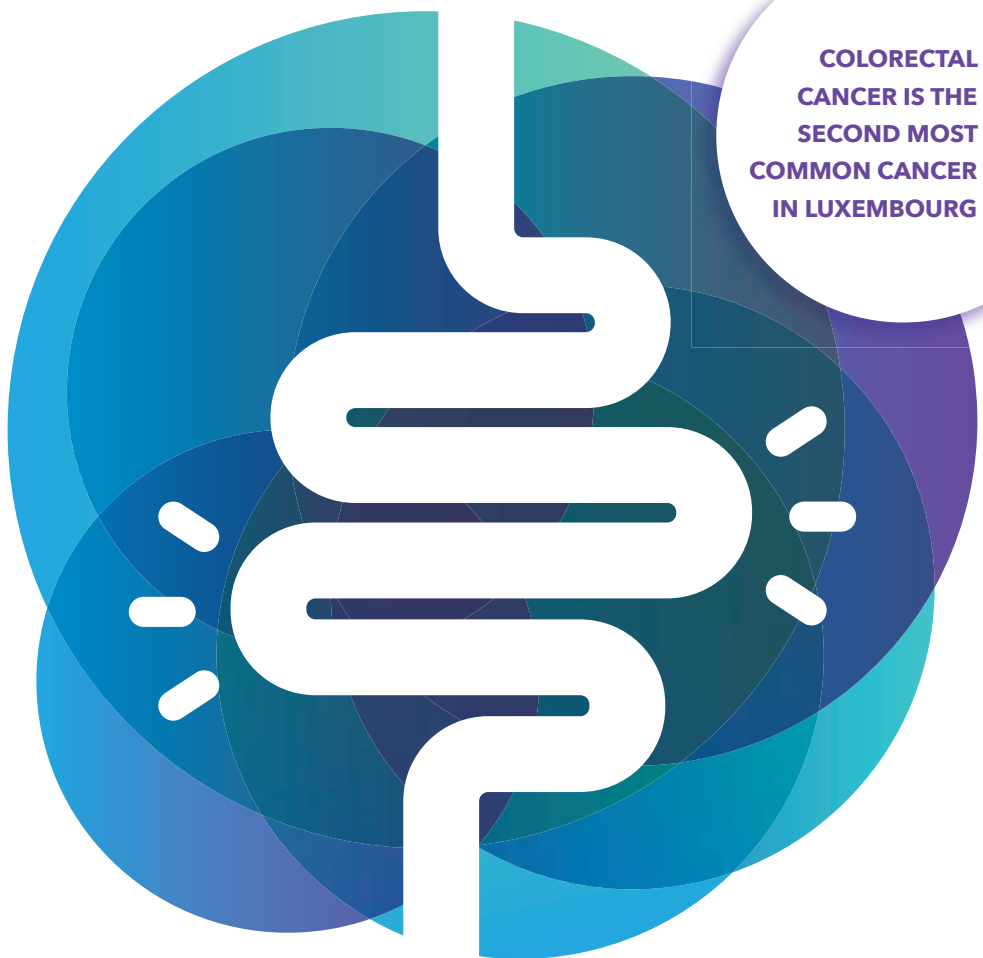


The colonoscopy

GET READY FOR THE EXAMINATION

**COLORECTAL
CANCER IS THE
SECOND MOST
COMMON CANCER
IN LUXEMBOURG**



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LE GOUVERNEMENT
DU GRAND-DUCHÉ DE LUXEMBOURG
Ministère de la Santé
et de la Sécurité sociale

Direction de la santé

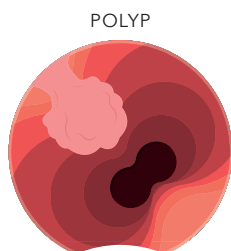
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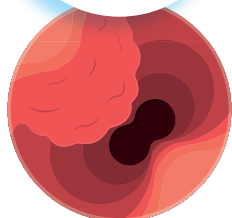
Your physician has advised you to have a colonoscopy, which you will undergo shortly. Please read this information sheet carefully so that you are properly informed about all the details of this medical procedure. Your physician is at your disposal to provide you with any further information you may require.

What is a colonoscopy?

A colonoscopy involves looking at the insides of your large intestine using a flexible tube equipped with a video camera, called an endoscope or colonoscope. The main purpose of this examination is to detect polyps and remove them immediately, if possible. Polyps are small growths in the lining of the colon that can develop into colorectal cancer over time. The success of the examination depends on a good preparation of your bowels.

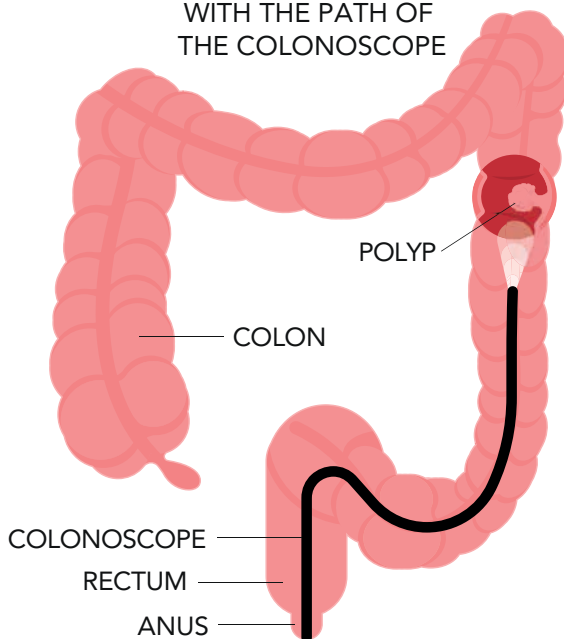


**A BENIGN
POLYP MAY
DEGENERATE
INTO CANCER**



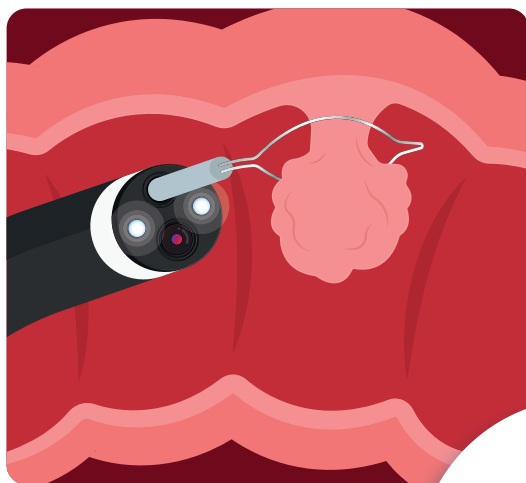
COLORECTAL
CANCER

DIAGRAM OF THE BOWEL WITH THE PATH OF THE COLONOSCOPE



Why should i have a colonoscopy?

This test is the reference examination for a check-up after a stool analysis test that has shown blood loss. It is also the first-line examination for people at high risk of colorectal cancer. During the colonoscopy, lesions detected by the physician may be removed for laboratory analysis - or biopsy. In the presence of a small polyp, it is possible to remove it immediately, before it develops into cancer.



POLYP REMOVAL

Even with a complete examination, small lesions may remain unnoticed or develop in the following months. We therefore recommend performing the FIT test (stool analysis) every 2 years. The specialist may also recommend a follow-up colonoscopy at the outset: it is important to follow his advice.

**IN ITS
EARLY STAGE,
COLORECTAL CANCER
DOES NOT
ALWAYS SHOW
SYMPTOMS**

**COLONOSCOPY
CAN DETECT MOST
COLORECTAL
CANCERS!**

Where can i have a colonoscopy carried out and by whom?

There is a list of specialist centres and physicians (gastroenterologists and internists) licensed by the Minister of Health to perform colonoscopies as part of the screening programme.

For a list of licensed centres and physicians, please refer to your physician or to www.sante.lu. This license guarantees that the quality and safety criteria for performing a colonoscopy are met. The licensing criteria for centres and physicians are also available at www.sante.lu.

You are free to have your colonoscopy performed at the centre and with the physician of your choice.

If you opt for a physician who is not licensed, colonoscopy is still possible, but it will be done outside the PDOCCR (with a different reimbursement).



**IF YOU HAVE
ANY QUESTIONS,
PLEASE CONTACT
THE COORDINATION
CENTRE:
247-75550**

How do i schedule an appointment for a colonoscopy?

Schedule an appointment at the chosen centre, **specifying that you are having a colonoscopy** following an abnormal result of your FIT test **under the national programme**. You will then be given an appointment for your colonoscopy to be carried out, if possible, within 30 days.

Make sure you have your social security registration card at hand, so that you can provide your exact details (surname, first name, social security number).

The licensed centre or physician will give you the date and time of your appointment, as well as a prescription to collect the bowel preparation product from the pharmacy. You will also be given instructions on how to drink the preparation.

Colonoscopy is also possible under anaesthesia: in this case, you will be given an appointment for a pre-anaesthetic consultation in order to obtain all the information relevant to this medical procedure.

What documents should i take to my appointment?

-
- ☒ The colonoscopy prescription signed by your doctor or the result of your FIT Test +.
 - ☒ Your social security registration card and your identity card.
 - ☒ The list of your usual medications.
-

Precautions to be taken before undergoing a colonoscopy

If you are taking medications such as anticoagulants (e.g. Clexane®, Sintrom®, Plavix®...), aspirin, anti-inflammatories (Diclofénaç®, Celebrex®, Arcoxia®...) or insulin, please discuss this with your physician at least 2 weeks before your colonoscopy appointment, so that your treatment can be adapted, if necessary, to your state of health, before the examination.



Make sure to inform your physician of any medicines you are taking, and whether you are suffering from any allergies or illnesses, especially heart problems or diabetes treated with insulin.

How do i prepare properly for the colonoscopy?

For optimal quality and safety of the examination, it is essential that your colon is perfectly clean.

In order to eliminate any residues from your intestine, you will need to follow a diet for 3 days before the examination and drink a liquid preparation, which can be prescribed by the physician performing your colonoscopy and which you can obtain in a pharmacy.



**A DIET
MUST BE FOLLOWED
3 DAYS BEFORE
THE EXAMINATION**

In practice

1

THE LOW-RESIDUE DIET TO BE FOLLOWED 3 DAYS BEFORE THE EXAMINATION

Do not eat any food containing fibre, cereals, seeds or pips. During the examination, the seeds caught up with the cleansing liquid remaining in your bowel may block the endoscope's suction channel, forcing the physician to interrupt the colonoscopy.

Forbidden food: fruits and vegetables (neither raw nor cooked) and especially those containing seeds such as kiwis, tomatoes, grapes, cucumber, etc. Similarly, avoid food containing seeds such as muesli, wholemeal bread or jams containing seeds.

Authorised food: white meat and fish, eggs, white bread, pasta, white rice, potatoes, as well as dairy products such as milk, cheese and plain yoghurt.

2

THE DIET THE DAY BEFORE THE EXAMINATION

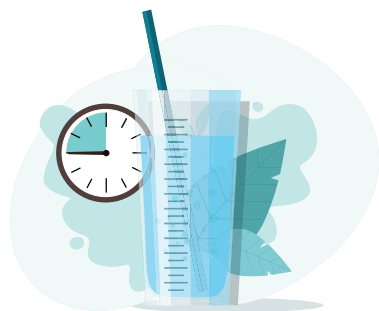
The day before your colonoscopy, you must have a light meal at lunchtime (without cereal products): clear broth, white bread with plain cream cheese or jelly jam or honey, white rice, noodles, plain yoghurt, grain-free pudding.

Drink only: coffee, tea or still water and avoid fruit juice containing pulp.

If **your colonoscopy is taking place the following morning**, you cannot have an evening meal the day before.

If **your colonoscopy is taking place the following afternoon**, you may eat a light meal (without cereal products) the evening before: clear broth, white bread with plain cream cheese or jelly jam or honey, white rice, noodles, plain yoghurt, grain-free pudding.

Cleansing your colon in order to prepare your bowel can be done with **a preparation to drink**, based on polyethylene glycol. It is a laxative with a salty taste due to the electrolytes (salts) it contains. The electrolytes prevent the loss of sodium, potassium or water during the preparation of the bowel. These salts have no significant effect on your blood pressure. If you suffer from decompensated heart or kidney failure, or if you are allergic to any of the components, you must inform the physician who will be performing your colonoscopy: you will then be offered the right bowel preparation fluid for your specific situation.



The preparation, which contains an active molecule (Macrogol), exists in the form of several different pharmaceutical products: Klean Prep®, Moviprep®, Colofort®, and Endofalk®

The physician who will carry out your colonoscopy will select one of these products. Generally these are sachets of powder to be dissolved in still water. You will be given the instructions for preparing and drinking the product along with the prescription for buying the product in a pharmacy.

It is important to emphasize that the choice of preparation may vary depending on the physician. He or she could therefore suggest other options to you. Do not hesitate to discuss this with him or her.

Before preparing the preparation fluid, read the instructions for use, contraindications and side effects. If you have any contraindications, call your physician or the physician you have chosen to perform your colonoscopy for advice.

Instructions to follow: The preparation liquid is taken differently depending on whether the procedure is planned for the morning or the afternoon.

-
- Once you start to drink the preparation, you can no longer eat.
-
- Ask your physician for advice on how to take your usual medication; generally, you should not take any medication just before you start drinking the preparation, as it will pass through the digestive tract quickly without being resorbed. This would make them ineffective. You should therefore take your medication at least 2 hours before starting to drink the preparation or 2 hours after finishing the final litre.
-

A

YOUR COLONOSCOPY IS CARRIED OUT **IN THE MORNING** ? = FRACTIONAL INTAKE OF THE PREPARATION

J -3	J -2	J -1	JOUR DE L'EXAMEN
<ul style="list-style-type: none"> • Diet 	<ul style="list-style-type: none"> • Diet 	<ul style="list-style-type: none"> • Diet • Between 5pm and 8pm, drink 3/4 of the preparation and do not eat any more 	<ul style="list-style-type: none"> • Do not eat anything in the morning • Drink the rest of the preparation • Stop 3 hours before the appointment

The day before the examination, start drinking the preparation **around 5 p.m.** It is recommended that you start between 5 and 8 p.m. if possible (about 3/4 of the total preparation). Generally, the passage of stool starts after 1 to 2 hours and takes 4 to 5 hours depending on how long the product is ingested. Therefore, stay close to a toilet. If you start drinking around 5 p.m., **the preparation phase will be over by 10 p.m.** You can start the preparation later, but you risk a disturbed evening and first part of the night.

On the morning of the examination, drink the rest of the preparation (about 1/4 of the total preparation) and finish it 3 hours before the time of your colonoscopy appointment. In this way, remaining stools from the night will be eliminated from your system before the colonoscopy.

B

YOUR COLONOSCOPY IS CARRIED OUT **IN THE AFTERNOON** ? = NO FRACTIONAL INTAKE OF THE PREPARATION

J -3	J -2	J -1	JOUR DE L'EXAMEN
<ul style="list-style-type: none"> • Diet 	<ul style="list-style-type: none"> • Diet 	<ul style="list-style-type: none"> • Diet 	<ul style="list-style-type: none"> • Do not eat anything in the morning • Drink the whole preparation

Start drinking the preparation **from around 8 a.m. on the day of your examination.**

Dissolve each sachet in one litre of still water and **drink the preparation** if possible by 12 noon. Generally, the passage of stool starts after 1 to 2 hours and takes 4 to 5 hours depending on how long the product is ingested.

Stay close to a toilet.

4

**PRACTICAL ADVICE
TO IMPROVE TOLERANCE OF THE PREPARATION**

- The preparation is easier to drink if it is **cold**. Prepare it in advance and put it in the fridge.
- If the salty vanilla taste disturbs you, you can add flavoured **syrup** to the preparation (e.g. mint, grenadine, lemon, etc.)
- You can mask the taste by having a **candy** with a strong flavour.
- If you feel nauseous, **divide** the drinking sessions up further.
- In order to avoid the skin around the anus being irritated by repeatedly passing liquid stools, protect the skin with **cream**.
- If you have any difficulties in tolerating the preparation, please contact the centre where you will be performing the colonoscopy. If the problem persists and you are unable to take the preparation properly, please contact the physician you have chosen to perform your colonoscopy to discuss an alternative preparation method.

5

IF YOUR BOWEL IS NOT PROPERLY PREPARED

If there is any faecal residue left in your bowel, the physician will not be able to examine the lining of your bowel properly nor to determine if there are any polyps that need be removed. The colonoscopy will then be stopped and you will be invited to come back at another date after carrying out a thorough preparation.

**BY FOLLOWING
THE DIET AND PERFORMING
A BOWEL CLEANSING,
YOUR COLONOSCOPY
CAN BE CARRIED OUT
UNDER THE BEST POSSIBLE
CONDITIONS**

Examination procedure

During the procedure you will be lying on your side or on your back. The endoscope (a flexible device equipped with a camera) will be introduced via your anus.

The colonoscopy will last for around 20 minutes. A tranquilliser can be administered in order to improve tolerance and make the examination easier. During the procedure, CO₂ gas will be pumped in to smooth out the colon wall so it is easier to see.



After the examination, air left behind in the colon can cause temporary bloating. If you feel any pain once you return home, you should contact the endoscopy department as soon as possible on the telephone number that will be provided to you. Outside working hours, contact the emergency service at the hospital on duty.

If you would like to have the examination done under heavy sedation or general anaesthetic, you will need to have a specialist consultation with an anaesthetist beforehand. Please mention it when you take your appointment.

Post-colonoscopy monitoring

If your colonoscopy was performed without sedation, you can leave immediately after the examination and go back to work.

If you have been sedated or had a general anaesthetic, you will need to stay in the monitoring room after the examination, usually for between 1 and 3 hours, before being able to leave. It may be necessary to monitor you for longer if you have had any polypectomies (polyp removals). The physician will decide how long you need to be monitored for.

If you take tranquillisers or undergo heavy sedation or a general anaesthetic, you will not be able to drive. You will need to be accompanied by someone who can drive you home.

The risks and complications involved

Any medical procedure, even where competence and safety conditions are in line with current scientific data and applicable regulations, carries risks of complications.

COMPLICATIONS
OF COLONOSCOPY
ARE RARE

- Perforation of the bowel, a serious complication related to colonoscopies, is very rare, but usually requires urgent surgical intervention.
- In exceptional cases, major haemorrhaging might occur following a polypectomy. It may be more likely where the patient has an existing tendency to haemorrhage or is taking anticoagulant medication. An endoscopic or surgical intervention and/or transfusions might be necessary.
- Other complications can arise but remain exceptionally rare, such as cardiovascular or respiratory problems, or an infection. The risks of infections are reduced to a maximum due to the current disinfection procedures conducted after each procedure and due to the single use devices during the removal of polyps or lesions.



Complications normally arise immediately after a colonoscopy procedure, but can sometimes occur in the following days.

! If bleeding, abdominal pain, fever or other abnormal symptoms occur, even in the days following the examination, contact the doctor who carried out your colonoscopy as soon as possible or go to the hospital emergency department.

Hygiene and safety

In order to guarantee your safety, the hospital facility and the physician that you have chosen for your colonoscopy respect strict hygiene and safety standards, in particular concerning the cleaning and disinfection of the colonoscope. They are committed to using disposable equipment for the removal of polyps or cancerous lesions.

Consent

Before undergoing your colonoscopy, you will be asked to sign an informed consent document which you will give to the physician you have chosen to carry out the examination. In signing the document, you acknowledge that you have received information on the colonoscopy, that you have been able to ask your questions to the physician and that you have understood the advantages and risks of the procedure.

**IF YOU HAVE
ANY QUESTIONS,
PLEASE CONTACT
THE COORDINATION
CENTRE:
247-75550**



Contribution to costs

Your financial fee for the colonoscopy examination will include the following:

- Part of the amount for the bowel preparation product (60%) is paid at the pharmacy, the other part being paid by your health insurance company
- If you undergo the colonoscopy without sedation, the physician will charge you for the examination and you will be reimbursed by your health insurance company. If your colonoscopy is performed under heavy sedation or general anaesthesia, the physician may opt for third-party payment (tiers payant). The hospital will ask you to contribute to the costs.

The screening programme

OBJECTIVES

- 1 Reduce mortality caused by colorectal cancer.
- 2 Detect colorectal cancer in an early stage in order to provide easier treatment for patients.
- 3 Prevent cancers by removing polyps.

GOVERNANCE

The Ministry of Health is the public authority responsible for the implementation of the colorectal cancer screening programme, its post-evaluation, and the processing of personal data. This programme is organised in partnership with the National Health Fund (CNS).

In practice, the screening programme will be managed and implemented by a Coordination centre for cancer screening programmes (Centre de coordination des programmes de dépistage des cancers), attached to the Health Directorate of the Ministry of Health.

PERSONAL DATA

Your personal and medical data relating to your colonoscopy, including the result of the examination, will be transmitted by the physician who performed your colonoscopy and by the laboratory that analysed the samples, to your regular physician, as well as to the physician in charge of the colorectal cancer screening programme to ensure the follow-up of your screening. This data will then be pseudonymised and processed under conditions of confidentiality in order to assess the overall effectiveness of the screening programme and to enable a comparison with the national cancer register.

If you underwent a colonoscopy between two screening intervals, the National Health Fund will provide the physician in charge of the screening programme with certain data related to this examination (date, place, physician who prescribed the colonoscopy and physician who performed the colonoscopy). This data will enable the frequency of your screening to be adapted.

In accordance with the law of 2 August 2002 on the protection of individuals with regard to the processing of personal data, you retain your rights of access, rectification of your data and opposition to the processing of your data. To do so, simply send your request to the Coordination centre for cancer screening programmes.



**IF YOU HAVE ANY QUESTIONS
ABOUT THIS SCREENING PROGRAMME, YOU CAN:**

- Contact the **Centre de coordination des programmes de dépistage des cancers**
Ministère de la Santé et de la Sécurité sociale,
Direction de la santé
20, rue de Bitbourg
L-1273 Luxembourg-Hamm
Tél.: (+352) 247 755 50
E-mail: colorectal@ms.etat.lu
- Visit www.sante.lu