



Gastroscopy

Introduction

This guide has been written to help you if you are waiting for a gastroscopy. It explains what a gastroscopy is and what it is used for. It also explains some of the things you can do to try to manage your symptoms while you are waiting for a gastroscopy.

This guide has been prepared by national experts in gastroscopies and reviewed by members of the British Society of Gastroenterology's endoscopy committee. It draws on the latest understanding about what can help people who are waiting for a gastroscopy to manage their symptoms.

You can download and print this guide to share with family, friends and carers.

What is a gastroscopy and what is it used for?

A gastroscopy is a test to check inside your throat, food pipe (oesophagus) and stomach, known as the upper part of your digestive system. A long, thin, flexible tube with a small camera inside it is passed into your mouth then down your throat and into your stomach.

Many people who are referred for a gastroscopy suffer from heartburn, reflux, bad taste in the mouth, indigestion or abdominal pain. A gastroscopy test can help find out what's causing these symptoms.

For the vast majority of people, a gastroscopy will not find anything to worry about. Some people may have regular surveillance gastroscopies or underlying long-term conditions such as Barrett's disease or family history of diseases. A gastroscopy can also be used to remove tissue for testing (biopsy) and treat some conditions such as stomach ulcers.

Waiting for your gastroscopy

Hospitals are working incredibly hard in trying to meet the increased demands for gastroscopies following the COVID-19 pandemic. However, a long wait can be very difficult. This guide has some information and advice that can help you manage your symptoms and prevent them getting worse while you are waiting.

If your symptoms have improved or have gone completely, please contact your doctor or care provider as you may no longer need a gastroscopy.

What should I do if I believe my health is deteriorating?

It is important to be aware of symptoms that require urgent attention. If you develop any of the following symptoms while awaiting your test, **please make your doctor or care provider aware**:

- New onset difficulty swallowing food or drink
- If you are aged 55 or over and notice weight loss along with pain in the upper part of the belly or reflux

Managing your symptoms while you are waiting

It can be very difficult if you are experiencing heartburn, reflux, bad taste in the mouth, indigestion or abdominal pain on a daily or a regular basis. There are some things you can try that can help to ease your symptoms while you wait for your test. These may also be things you can continue to do after your colonoscopy to help you to manage your symptoms.

1. Careful meal planning

- If you suffer from heartburn, reflux or indigestion, it is best to aim for smaller meals, to try to avoid spicy, acidic or fatty foods and to reduce the amount of caffeine your drink.
- It is also advisable to avoid going to bed with food or drink in your stomach. To do this, you should avoid eating for up to three hours before bed.
- Keep a food diary: if you have any foods that trigger symptoms, take a note of these and try to avoid them or reduce your intake.
- It is best not to start a gluten-free diet while you are awaiting your gastroscopy as it
 is very difficult to diagnose coeliac disease if you are not taking gluten at the time of
 your test.
- There is evidence that regular aerobic exercise may help indigestion.

2. Weight reduction - if you are overweight

- Being overweight or carrying additional weight can make your symptoms worse.
- Calculating your Body Mass index (BMI) can help you to identify if you are overweight. You can calculate your BMI using your height and weight measurements on a BMI calculator available at www.nhs.uk/live-well/healthy-weight/bmi-calculator.
 The ideal BMI is between 18.5 and 25.
- If you find out that you are overweight, you can find advice, information and support here to help you lose weight: https://www.nhs.uk/better-health/lose-weight/
- Some other helpful tips for weight loss are:
 - o Aim for regular meals, try not to skip breakfast and eat plenty of fruit and veg.
 - Aim for high fibre foods and use smaller plates.
 - Avoid stocking up on junk food. It is best not to 'ban' some foods completely as you will probably crave them.

3. Alcohol Reduction

- If you drink alcohol, reducing how much you drink can help improve symptoms such as reflux, heartburn, indigestion, and stomach pains.
- You can use an online tool to assess how many units of alcohol you currently drink at www.alcoholchange.org.uk/alcohol-facts/interactive-tools/unit-calculator.
- It is recommended that adults should not drink more than 14 units of alcohol per week. This is around six medium glasses of wine or six pints of beer. It is best to spread this drinking over three days or more during the week.

4. Stopping smoking

- Quitting smoking is one of the best things you can do for your health and may help to improve your gastrointestinal symptoms.
- You can find more information on www.nhs.uk/better-health/quit-smoking.

5. Stress Management

- High levels of stress can contribute to gastrointestinal symptoms.
- It is worth evaluating your stress levels to see if you can improve this area of your self-care. There are some very good tips on stress management available on https://patient.info/mental-health/stress-management.
- Mindfulness is an approach that has some simple exercises that can really help to reduce stress, induce calm and improve wellbeing. There are some good resources available on:

www.nhs.uk/mental-health www.padraigomorain.com www.headspace.com

6. Coffee consumption

Reduction in coffee intake has been shown to help with indigestion symptoms.

7. Bacterial infection

 Some people may develop symptoms due to a bacterial infection (a bacteria known as Helicobacter pylori). This can be detected by a test on a stool (poo) sample. If detected, this infection can be treated by using a combination of antibiotics and acidsuppressing medications. If this is case, it is best to ensure you have completed the full treatment before going for a gastroscopy.

8. Understanding your condition

 You may already have a known long-term condition. There is evidence to suggest that knowing as much as you can about your condition can lead to better health outcomes. Speak to your doctor or specialist nurses.

Medications

There are some medications that can cause or worsen gastrointestinal symptoms.

It is worth reviewing your medications with your doctor or pharmacist to identify if you are on any potentially problematic tablets or others and see if they can be changed if necessary. Ensure you mention all your medications to your doctor, including the over-the-counter ones. This will help in treatment planning.

Medications that can cause or worsen gastrointestinal symptoms:

- Nitrates, calcium channel blockers (used for blood pressure), diazepam (a relaxant) and bisphosphonates (used for osteoporosis).
- NSAIDs (Non-steroidal anti-inflammatory drugs) are the most common cause of gastrointestinal symptoms. These are painkillers. Some NSAIDs require prescriptions, but others, like ibuprofen and aspirin, are available over the counter. Try to avoid taking these medications over the counter and speak to your GP if you are currently prescribed these medications.

There are some medications that can help with gastrointestinal symptoms:

1. Antacids

Antacids are alkaline tablets or liquids that help to neutralise acid in your stomach. They can be used for quick relief of indigestion or heartburn. Many brands are available over the counter (i.e. you don't need a prescription for them).

2. Proton Pump Inhibitors (PPI)

These are medications used to reduce the amount of acid produced in your stomach. They include many medications ending with -azole such as omeprazole, lansoprazole, esomeprazole. They help to reduce inflammation in the oesophagus and stomach related to excess acid. Many are available over the counter. They come in 'treatment' and 'maintenance' doses. You can talk to your pharmacist or GP regarding the best dose for you. Sometimes, if you are already taking a PPI, an increase in the dose will help alleviate symptoms.

Alternatives to gastroscopy

Gastroscopy has been considered as the best test for you based on your clinician's opinion. There may be other tests that could be considered as an alternative. However, there might be delays in getting these tests done too and they may not be the best test for you. Your clinician could advise you if you had any concerns and want to talk about alternatives.

Where can I find additional information?

For management of physical symptoms, there are some very good resources available online. These include:

www.nhs.uk/conditions www.patient.co.uk

The authors of this guidance would like to thank the patients and service users who contributed to the development of this document.