

Enhanced Sedation for GI Endoscopy

Department of Anaesthesia
and The Digestive Diseases Centre



A patients' guide to Enhanced Sedation for OGD, colonoscopy and ERCP

This leaflet only describes the sedation part of your care. Please refer to the specific leaflets listed at the end of this leaflet for more information about your endoscopy procedure.

At the Royal Sussex County Hospital in Brighton we run a specialised Enhanced Sedation service in Endoscopy delivered by Consultant Anaesthetists and the Endoscopy Team. Under this deeper sedation, you will be more comfortable during the procedure. This is not a general anaesthetic and you may be at times aware of what is going on but it shouldn't be distressing. You may remember parts of your procedure afterwards. You are monitored closely and the anaesthetist is at your side to adjust the level of sedation and give painkillers as needed.

There are certain medical conditions which may mean we cannot offer this deeper sedation. If this applies to you, we will make the appropriate arrangements for you.

What is enhanced sedation?

Enhanced sedation is when a sedative (sedation medicine) is injected into your bloodstream through a drip to relax you.

Anaesthetists are trained in giving the right amount of sedative and managing any side effects. For enhanced sedation in endoscopy, we aim for 'moderate' (also called conscious sedation) to 'deep' sedation.

With moderate sedation you feel drowsy, comfortable, sleepy and relaxed, but you remain conscious throughout the procedure and able to follow simple instructions. With a general anaesthetic you are completely unresponsive and unconscious during the procedure. Deep sedation is between the two.

What should I do before I come to hospital?

- You need to arrange a capable adult to take you home by car or taxi – ideally not public transport. As the effects of sedation can last up to 24 hours, they should stay overnight to look after you. If this is not possible, you may not be able to have the procedure
- If you have an illness, a cold or you are pregnant, please contact your hospital as it may not be safe to have sedation. Your treatment may have to be re-arranged
- If you have people that you look after, for example children or old people, you will need to plan for someone else to look after them until the next day
- Take all your medicines to hospital with you, including any inhalers you use
- Let your doctor know on the day of the procedure if you are breastfeeding.

Can I eat and drink before my treatment?

The endoscopy unit will give you instructions on when to stop eating and drinking. You may need bowel preparation for some endoscopy procedures.

You will need to stop eating at least six hours before your treatment, but you may drink clear fluids up to four hours before gastroscopy (OGD) and ERCP and 2 hours for a colonoscopy or flexible sigmoidoscopy. Clear fluids include water, diluted juice (no bits) and black tea or coffee (no milk or cream).

If you have diabetes, you should ask for specific instructions about when you should take your medication and stop eating food.

What will happen before my endoscopy?

Before your procedure you will speak to a pre-assessment nurse in person or over the phone who will ask you questions about your health to assess your suitability for enhanced sedation and can answer any questions you have.

You will be seen by the anaesthetist and endoscopist who can answer any questions you have. Your anaesthetist will meet you on the day of your procedure to review your medical history, discuss any risks and answer questions you may have.

When you go to the procedure room we will attach some monitoring equipment to you and prepare you for your procedure. You will be given oxygen to breathe from a plastic tube sitting just inside your nose, or through a clear face mask. You may be offered a local anaesthetic spray to your throat to make you more comfortable.

A small cannula (plastic tube) will be inserted in to one of the veins in your arm and the sedative will be injected through this. The endoscopy starts after you are sedated.

What will happen after my endoscopy and when can I go home?

- You will be taken to the recovery area where you will be monitored for a period of time
- When you can go home may depend on your recovery from the endoscopy itself
- Your decision making may be affected for up to 24 hours after sedation, so you should not make any important decisions during that time. Be careful if using social media

- You should not return to work, look after dependants, drive, cook or operate any machinery for 24 hours. It can take 24 hours for the drugs to leave your body.
- You should not take any alcohol or sleeping tablets for 24 hours after the procedure
- If after the procedure you are concerned or feel unwell, you can call your GP, ring 111, or go to your local accident and emergency department with a capable adult if necessary.

What are the benefits of enhanced sedation?

- It is quick acting and the dose can be adjusted so you get just the right amount
- It allows you to be more relaxed during your treatment. It may also mean that you remember very little about your treatment afterwards
- It usually has fewer side effects than a general anaesthetic
- Recovery is quicker than after a general anaesthetic or traditional sedation, so you can usually go home within an hour or two of your treatment if you feel well.

What are the risks of enhanced sedation?

Your anaesthetist will be able to give you more information about any of these risks and the precautions taken to avoid them.

- Your breathing rate may become slow. This is common in deep sedation, but is a risk whenever sedation is used
- Your blood pressure may drop
- An allergic reaction to the sedation drugs is very rare
- You may have a bruise where your cannula (drip) was placed or attempted
- Damage to teeth, lips and tongue
- You may feel less steady on your feet afterwards and you may be at higher risk of falling, especially if you are elderly
- Sedation can affect your judgement and memory for up to 24 hours.

In modern anaesthesia, serious problems are uncommon. Risk cannot be removed completely, but modern drugs, equipment and training have made sedation and anaesthesia much safer.

Anaesthetists take a lot of care to avoid all the risks outlined in this leaflet Information about your endoscopy.

Please refer to the following BSUH leaflets:

- About your colonoscopy examination
- About your ERCP examination
- About your flexible sigmoidoscopy examination
- About your gastroscopy examination

<https://www.bsuh.nhs.uk/your-visit/patientinformation-leaflets/>

If you have any other questions about your endoscopy or if you have vision, mobility or access issues ask a nurse at the Endoscopy unit or call us on **01273 696955 Ext. 4570**.

If you have any other questions about your Enhanced Sedation you can ask your anaesthetists on the day or call the Department of Anaesthesia on **01273 696955 Ext. 4307**.

This publication includes text taken from The Royal College of Anaesthetists' (RCoA) leaflet Sedation Explained, 2018 (you can find it and more information about sedation at www.rcoa.ac.uk/patientinfo) but the RCoA has not reviewed this as a whole.

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Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

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