



# Gastroscopy for children

## Advice for parents

Rainforest Ward and Safari Day Unit  
Lincoln County Hospital  
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[www.ulh.nhs.uk](http://www.ulh.nhs.uk)

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## What is a Gastroscopy?

Gastroscopy is a test which allows the doctor to look directly at your child's oesophagus (gullet), stomach and duodenum (small intestine).

The instrument used to perform this simple test is called the gastroscope/endoscope, which is a long thin flexible fibre optic tube. Within the end of this device is a miniaturised camera with a wide angle lens.

By passing this "scope" into your child's stomach, your doctor can directly examine the lining of the upper digestive system.

**The examination is carried out under general anaesthesia** and children do not remember having it done afterwards. There is no incision and the whole examination is quick and painless.

## Why is a Gastroscopy performed?

Gastroscopy is performed to evaluate symptoms of persistent upper abdominal pain, nausea, vomiting, difficulty swallowing, unexplained anaemia, persistent refusal to eat and taking a biopsy from the duodenum/jejunum to make a diagnosis of coeliac disease. It is also the best test for finding the cause of bleeding from the upper gastrointestinal tract.

Upper endoscopy/gastroscopy is usually more accurate than x-rays for detecting inflammation and ulcers.

## Preparation

Your child should not eat or drink for 4 hours prior to the test.

1. Your child can take his/her usual medications.

## References:

Patient and Parent Information for Gastroscopy – Sheffield Children NHS Foundation Trust

Children Information Fact Sheet - Gastroscopy  
University Hospital Southampton NHS Foundation.Trust

Information for Parents/Carers/Children and Young Adults on a Gastroscopy and Colonoscopy Procedures – **Norfolk and Norwich University Hospitals NHS Foundation Trust**

## What are the possible complications of a Gastroscopy?

All procedures can carry a risk but diagnostic endoscopy is safe.

Minor complications are uncommon and major complications (perforation, reaction to anaesthetic) are very rare.

**Bleeding** may occur from a biopsy site. It is usually minimal and rarely requires blood transfusions or surgery.

**Perforation** (a tear or hole) in the gullet or stomach can occur.

Although the gastroscope is thoroughly cleaned and disinfected after each use, the **possibility of infection** being introduced cannot be completely ruled out but is extremely rare.

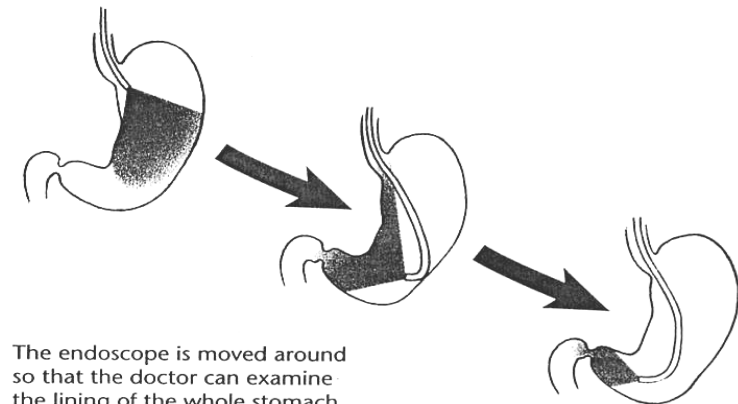
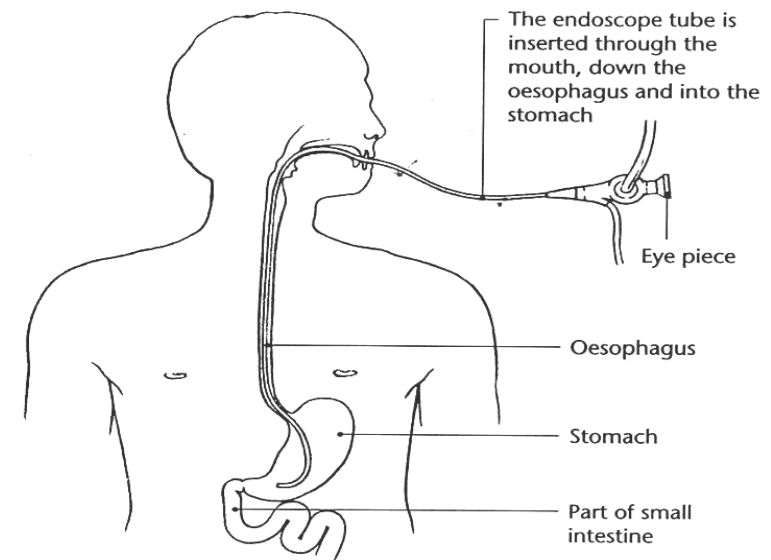
Other potential complications can occur from **reactions to the anaesthetic medication**.

Complications are rare but may require admission to hospital, a blood transfusion or surgery.

If your child begins to run a fever after the test or has trouble swallowing or has increasing throat pain, chest pain or abdominal pain, contact Rainforest Ward promptly (Tel: 01522 573786) or attend your local A & E department.

If you have any more queries please feel free to discuss them at any time.

## ENDOSCOPY



**Children with diabetes, however, have special instructions. A separate information sheet for diabetics is available.**

2. If your child is unwell/has a chest infection or wheeze, please contact and inform us as your child may not be fit for the general anaesthetic.

### **What can be expected on the day of the procedure?**

You will be seen by a doctor and asked about drug allergies your child may have and whether your child has had any other major diseases, such as heart or lung disease, that might require special attention during the procedure.

**If you have not yet signed the consent form, you will be required to do so.**

You will meet the anaesthetist who will make sure your child is fit for the general anaesthetic.

The Gastroscopy will be carried out in the general theatre.

### **Theatre**

You can accompany your child to the theatre and wait until your child has been given the anaesthetic. Your child will have a tube inserted into his/her airway to take control of his/her breathing by the anaesthetist. The whole procedure is pain free.

### **How long will it take?**

The whole procedure of moving your child to theatre, giving anaesthesia and doing the test should take approximately 30 to 45 minutes.

### **Looking inside**

The scope will be passed into the food pipe and then into the stomach and finally into the duodenum. To see the lining of the digestive tract, the stomach will be gently filled with a small quantity of air. If the Gastroscopy reveals abnormal conditions, a photograph may be taken.

To better evaluate areas of abnormality, the doctor may take a biopsy.

### **What happens after the procedure?**

Your child will be taken to the recovery room and monitored. Once he/she is fully awake and alert, he/she will then be returned to the ward.

Once your child is fully alert and is able to tolerate food and drink well and has passed urine, he/she will be discharged home by the nurse.

Your child should be able to go back to school and do his/her normal activities the day after their discharge.

### **Results**

A senior doctor will meet with you after the procedure and discuss any findings seen through the naked eye. However, the biopsy will give the definite answer.

**The results of the biopsy will usually be ready in 10 to 14 days. We will write to you and your doctor as soon the biopsy report becomes available.**