

**G**astroscopy is an investigatory procedure which allows the doctor to look at the inner lining of the oesophagus, stomach and duodenum by using a long flexible tube (the size of your little finger) with a tiny video camera and light source at the end that is placed through your mouth. It allows the doctor to detect ulcers, tumours and inflammations in your upper digestive tract and is useful for the diagnosis of bleeding, swallowing problems or abdominal pain.

### Who should have gastroscopy?

The procedure is indicated for:

- Dysphagia
- Recurrent epigastric pain
- Gastro - Esophageal Reflux Disease (GERD)
- Peptic ulcers
- Upper gastrointestinal bleeding (tarry stool)
- Suspected upper gastrointestinal malignancy
- Cancer screening for high risk group

### How to prepare for the procedure?

- Do not eat or drink anything for 6-8 hours before the procedure.
- The procedure can be performed on the same day right after the consultation for patients who have already fasted for 6-8 hours.

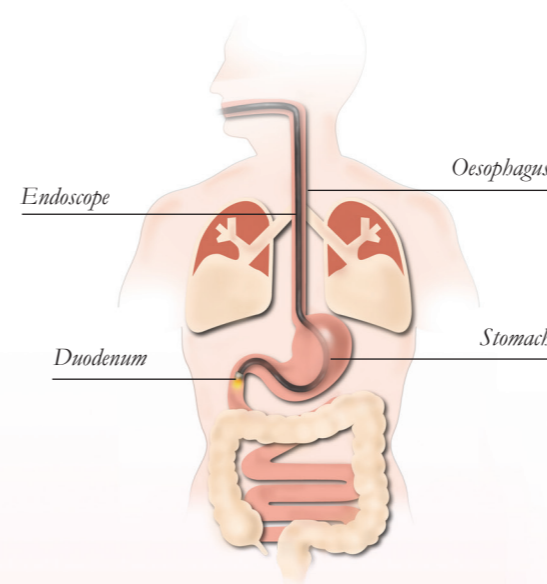
### What happens when the procedure is performed?

- You might be given a “sedative” through an intravenous (IV) line before the procedure begins. This medication will put you to sleep through the procedure.

- A local anesthetic will be sprayed onto your throat to minimize the discomfort (choking feeling) when the tube is being introduced.
- You will be asked to swallow at the time the tube is placed into your throat. This will guide the endoscope into your oesophagus. The doctor will gently push the tube so that its end moves into your gullet.
- If a suspicious area is seen on the lining of the stomach or esophagus, the doctor will remove a tiny piece of tissue (a biopsy) for examination under the microscope.
- The procedure takes only 10-15 minutes.
- During the procedure, it is normal if you have a feeling of nausea. Relaxation can help to facilitate the procedure.

### Must I do anything special after the procedure is over?

- If you have not been given IV sedatives, you are advised to rest for at least 15-30 minutes and can leave if there is no complication.
- You can drink water one hour after the procedure and resume normal diet if there is no choking.
- If you have been given sedatives, you must be accompanied by an adult when you leave because the intravenous sedation might make you dizzy. Please do not drive, ride a bicycle, operate any machinery or drink any alcoholic beverage within 24 hours after the procedure.
- You may experience a minor sore throat and/or abdominal distension immediately after the procedure. These symptoms will gradually subside. Inform your doctor if these symptoms persist.



### Possible risks or complications of the procedure:

- Bleeding caused by biopsy taking, polyp removal and endoscopic haemostatic procedure (<0.1%)
- Infection (extremely low)
- Perforation of the oesophagus, stomach, duodenum and small intestine (0.03%)
- Death (0.001%)
- Drug allergies and adverse reaction to anaesthesia / sedation are extremely rare but may occur.

One may require surgery, hospitalization and/ or transfusion should any complication occur.

### Endoscopy Centre

The Centre is managed by a team of dedicated and experienced endoscopists. It is equipped with state-of-the-art endoscopic imaging systems and the aim is to provide high quality services in the diagnosis and

treatment of diseases of the gastrointestinal tract, biliary and pancreatic system as well as the respiratory system. If necessary, during the procedure, the patient can be sedated with the help of our experienced anaesthesiologists to minimize any discomfort he/she might encounter during the procedure.

Patients who choose to undergo the consultation and gastroscopy procedure on the same day should fast (do not eat or drink) for 6 to 8 hours before they come to the Centre. Our specialists will tell you right after the procedure what is seen in your upper digestive tract. If biopsies are taken, it will take 2 to 3 working days to complete the report. Your specialist or attending doctor will contact you for subsequent follow-up and treatment.

For further enquiries and appointment, please contact us at :

2 Village Road, Happy Valley, Hong Kong

Tel : 2835 8623 Fax : 2892 7529

E-mail : [endoscopy@hksh.com](mailto:endoscopy@hksh.com)

[http:// www.hksh.com](http://www.hksh.com)

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胃鏡檢查是醫生把一支可屈曲、末端裝有光源及微型攝影機的軟管〔大概如尾指般大小〕，由病人口腔進入，以觀察食道、胃部及十二指腸是否有潰瘍、腫瘤或發炎等上消化道之疾病，有助於診斷出血、吞嚥困難或腹痛之原因。

### 誰人應接受胃鏡檢查？

如有以下情況，便應接受胃鏡檢查：

- 吞嚥困難
- 復發性的上腹部疼痛
- 胃食道逆流性疾病(胃酸倒流)
- 消化性潰瘍
- 上消化道出血(排出黑色柏油糞便)
- 懷疑患上消化道癌症
- 高危人士作定期癌症普查

### 應該怎樣準備？

- 於檢查前6至8小時，須禁食(包括飲料及食物)。
- 如到診前已禁食6至8小時，則可於接受醫生評估後即日進行胃鏡檢查。

### 檢查是怎樣進行的？

- 檢查前，醫生或會為你作靜脈注射鎮靜劑，令你在檢查進行期間入睡。
- 醫生會在你的喉部噴上局部麻醉藥，以減輕胃鏡進入時引致的不適(哽噎的感覺)。
- 當管子進入喉部時，如你能以吞嚥的動作配合，則有助管子順利由食道進入你的胃部。
- 於檢查進行時，如醫生發現你的胃部及食道有可疑的地方，會取一小片組織作化驗。

- 這項檢查只需10至15分鐘便可完成。
- 檢查期間可能有噁心的感覺，這是正常反應，儘量放鬆有助減輕不適，使檢查較容易進行。

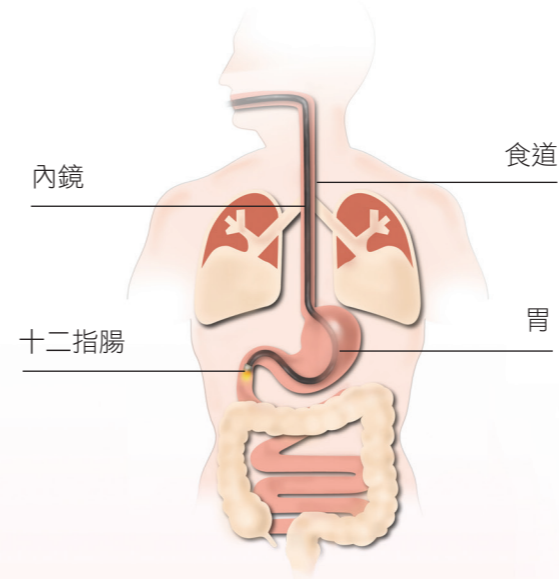
### 檢查後須注意的事項

- 未有注射鎮靜劑的病人需要休息15至30分鐘，如無任何併發症及得到醫生許可，便可離開。
- 檢查後約一小時，可先試行喝水，以試驗吞嚥能力是否恢復；如無噎硬及吞嚥能力恢復，則可作正常進食。
- 如檢查時曾注射鎮靜藥物，可能會有暈眩的感覺，須由成年親友陪同下方可離開。檢查後24小時內，請勿駕駛、踏單車、操作機械或飲用含有酒精之飲料。
- 檢查後，你可能會有輕微的喉痛或腹脹，不適的感覺會逐漸減退。如不適的感覺持續，請通知主診醫生。

### 有可能引起的風險及併發症：

- 抽取活組織、切除息肉及進行內視鏡止血程序引致出血(<0.1%)
- 感染細菌(可能性非常低)
- 食道、胃、十二指腸及小腸穿孔(0.03%)
- 死亡(0.001%)
- 由麻醉藥或鎮定劑引起的藥物敏感或不良反應相當罕見，但同樣有機會發生

假如有併發症，病人或需要進行手術、住院及/或輸血。



### 內鏡中心

本中心由經驗豐富的內鏡專科醫生主理，以最先進的內視鏡攝影儀器，為消化道、膽胰及呼吸系統疾病的患者提供優質的診斷及治療服務。本中心更可为病者安排麻醉科醫生注射鎮靜藥物，將病者在檢查期間可能出現之不適減至最低。

病者如欲同日接受專科診症及胃鏡檢查，須於檢查前6至8小時禁食(包括飲料及食物)。檢查後，專科醫生會即時告訴你檢查結果。如曾取出組織切片作化驗，檢查報告將於2至3個工作天完成，隨後專科醫生或主診醫生將約見病者解釋報告及治療。

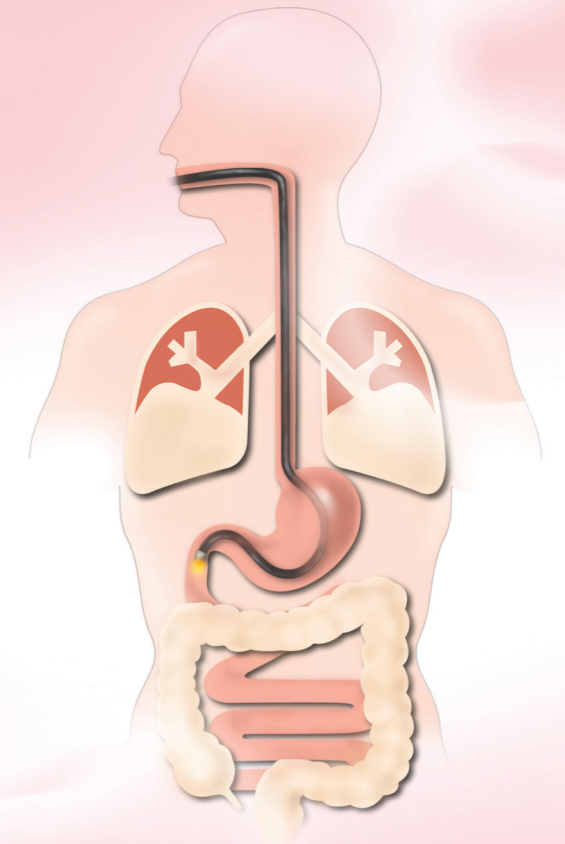
專科診症，敬請預約  
如有查詢，歡迎致電本中心

香港跑馬地山村道二號  
電話：2835 8623 傳真：2892 7529  
電郵：endoscopy@hksh.com  
http://www.hksh.com

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# 胃鏡檢查 Gastroscopy



養和醫院  
內鏡中心

Hong Kong Sanatorium & Hospital  
Endoscopy Centre