



# Your child's test to check the upper part of their digestive system (gastroscopy)

This leaflet is about a test called a gastroscopy. It is used to check the upper part of your child's digestive system in detail. The leaflet explains what you should do before your child's procedure, on the day of the procedure and when you return home.

# Your child's procedure

#### What is a gastroscopy?

A gastroscopy is a test that allows your child's doctor to look closely at the upper part of their digestive system or gut. This includes:

- the food pipe (oesophagus) that passes food down to reach the stomach
- the stomach
- the first bend (duodenum) of the small intestine

This procedure is sometimes called an OGD (oesophago-gastro-duodenoscopy).

Your child has the procedure under a general anaesthetic. This is a medicine that makes them sleep and stops them feeling any pain during the procedure.

# Before your child's procedure

## What needs to happen before my child's procedure?

Your child needs to have a pre-admission assessment before their procedure. This assessment may take place face to face or online. We make sure that your child is ready for an anaesthetic and surgery. After the pre-admission assessment, our admissions team contacts you by letter, text message or phone. We offer you a date for your child's procedure.

We also explain when your child should stop eating and drinking (fast) before their procedure. For us to have a clear view of your child's digestive system, their stomach must be completely empty. Here is some general guidance:

- Your child should not have anything to eat for at least 6 hours before the test.
- The only exception is for babies, who can have breast milk until 4 hours before the test.
- Your child can drink water until they arrive at the Evelina London children's day surgery unit. We then give more instructions about when to stop drinking before the procedure

Your child needs to continue taking any routine medicines, unless the doctor tells you otherwise.

#### Do I need to get pain medicine ready for my child?

We do not routinely give you paracetamol (a painkiller) or ibuprofen (an anti-inflammatory medicine) to take home for your child after day surgery. Your child may have mild tummy discomfort and a slightly sore throat after a gastroscopy. These side effects usually settle quickly and your child is unlikely to need pain medicine.



# On the day of the procedure

## When you arrive at the children's day surgery unit

We give you a time to arrive at the Evelina London children's day surgery unit. It is important that you arrive at the correct time and have followed the fasting and bowel preparation instructions for your child. If you arrive late or have not followed these instructions, we may not be able to do the procedure.

You and your child meet the gastroenterology and anaesthetic teams on the admissions ward before the procedure. We confirm that you have given your permission (consent) for the procedure. You can ask us any questions that you may have.

#### During the procedure

We give your child a general anaesthetic. This is a medicine that makes your child sleep and stops them feeling any pain during the procedure. You can stay with your child until they are asleep. Please see our separate leaflet called "Your child's general anaesthetic" for details.

During the procedure, the doctor uses a thin, flexible tube called a gastroscope or endoscope. This tube is as thin as a little finger and has a light and small camera at one end.

When your child is asleep, the doctor passes the tube through their mouth, down the food pipe and into the stomach. The doctor then carefully examines your child's gut as pictures from the inside of it appear on a television screen.

The doctor takes small pieces from the bowel called biopsies. They are about the size of a pinhead. After the procedure, we send the biopsies to a laboratory. Another doctor called a pathologist then examines them in detail under a microscope.

#### Are there any other treatment options to this procedure?

We recommend a gastroscopy if this is the most suitable test for your child. Doing a gastroscopy is the only way that we can look directly at the lining of your child's food pipe, stomach and small intestine. It is also the only way that we can take samples or biopsies to help us make a diagnosis.

In some cases, a barium meal may be another treatment option. This involves swallowing a white liquid called barium, which coats the inside of the food pipe, stomach and small intestine. We then take X-rays and the white liquid shows on the X-ray pictures.

A barium meal involves radiation and is less accurate than a gastroscopy. Your child might still need a gastroscopy if we find anything unusual during the barium meal.

There are a few other tests that might also be useful, but do not replace a gastroscopy. These may include:

- a CT or MRI scan
- a test on a sample of poo (stool sample) for a stomach infection caused by bacteria called helicobacter pylori
- a blood test for coeliac disease (a condition where the body cannot digest gluten)

### Are there any risks to my child's procedure?

Every procedure has some risks of complications. To reduce these risks, we make sure that your child is well at the time of the procedure. We talk to you about the risks in the clinic and before the procedure when we confirm that we have your consent.

A gastroscopy is a very safe procedure and complications are rare. A complication happens in less than 0.5 to 1 out of 100 cases (the overall risk of any complication is less than 0.5 to 1%).

Sometimes, the tube used during the test (gastroscope or endoscope) can damage the lining of the food pipe, stomach or intestine. This can cause:

- bleeding
- infection
- very rarely, a tear (perforation) in the food pipe, stomach or intestine

If there is any complication during the procedure, your child might need more treatment.

# After your child's procedure

#### How will my child look and feel after their procedure?

Your child may feel drowsy after their procedure and sleep for a while. They may be restless (agitated) and upset for up to an hour after waking up from the procedure. Some children may feel or be sick (vomit), but this is not common.

#### Will my child be in pain or discomfort after their procedure?

After a gastroscopy, your child may feel a bit full and uncomfortable (bloated). They may have mild tummy discomfort and a slightly sore throat. These side effects usually settle quickly.

#### When can my child eat and drink or feed after their procedure?

Your child should be able to eat and drink or feed as usual within 1 to 2 hours of the procedure.

#### Do we see the doctor after my child's procedure?

Yes, you see the doctor after the procedure. They explain the findings of the gastroscopy. Sometimes, the doctor might be able to show you pictures of your child's gut.

It usually takes 2 to 4 weeks before we get the biopsy results. However, your child may start taking medicines or having treatment based on what the doctor has seen during the procedure.

#### When can my child go home?

Your child can go home on the same day as their procedure when they:

- feel comfortable
- can manage (tolerate) their usual food and drink
- are not feeling sick (nausea) or being sick (vomiting)
- are behaving as they usually do

Please supervise your child carefully on the journey home. According to the sudden infant death syndrome (SIDS) guidelines, it is best to avoid long car journeys for babies under 1 year of age. If you travel home by car, it is important that:

- you stop for frequent breaks to feed your baby and change their position
- an adult sits with the baby in the back of the car

## After you go home

#### How do I care for my child at home after their procedure?

The doctor or a member of their team gives you specific instructions on caring for your child after the procedure. They explain the arrangements for their follow-up care.

It is important to make sure that your child drinks plenty of fluids. If they have a slightly sore throat after the procedure, sipping warm drinks can help.

For the first 24 hours after having a general anaesthetic, it is best for your child to rest at home. They need to avoid activities like riding a bicycle or playing sports while the general anaesthetic wears off. Young adults must not drive a car, operate machinery or make important decisions for the first 24 hours.

Your child should be able to return to their usual activities, including going to nursery, school or work, 24 hours after the test.

#### Do I need to look for any symptoms after my child's procedure?

Contact a GP or go to your nearest emergency department (A&E) immediately if you feel that your child is unwell or they:

- get severe pain in the tummy
- have a high temperature (fever)
- are being sick (vomiting)
- are passing large amounts of blood

Please take the report that we give you after the test with you.

#### Do you see my child again after their procedure?

A doctor at the hospital phones you when the biopsy results from the laboratory are available. This usually takes 2 to 4 weeks but can sometimes be longer.

Based on the results, we plan how to manage your child's symptoms and arrange a follow-up appointment if needed.

## **Contact us**

If you **cannot keep your appointment**, contact our admissions team, **phone** 020 7188 9098, **email** gst-tr.paediatricadmissions@nhs.net

If your child has a **cough, cold or high temperature** in the 2 weeks before the procedure, contact our pre-assessment team, **phone** 020 7188 7188 extension 58209

If you have any **concerns between 7am and 9pm** about your child's surgery, call the children's day surgery unit, **phone** 020 7188 5300

If you have any **concerns between 9pm and 7am** about your child's surgery, call the Savannah ward through the main switchboard, **phone** 020 7188 7188

If you have any **concerns from 24 hours after surgery** about your child's health, contact your child's specialist surgical team or GP surgery, or **phone** NHS 111

If you are concerned that your child is **seriously unwell** at any time, go to your nearest A&E or **phone** 999

For more information on conditions, procedures, treatments and services offered at our hospitals, please visit web www.evelinalondon.nhs.uk/leaflets

#### **Evelina London Medicines Helpline**

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline, **phone** 020 7188 3003, Monday to Friday, 10am to 5pm **email** letstalkmedicines@gstt.nhs.uk

#### Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS), phone 020 7188 8801 email pals@gstt.nhs.uk. To make a complaint, contact the patient resolution team phone 020 7188 3514 email complaints2@gstt.nhs.uk

#### Language and accessible support services

If you need an interpreter or information about your child's care in a different language or format, please get in touch, phone 020 7188 8815 email languagesupport@gstt.nhs.uk

#### **NHS 111**

This service offers medical help and advice from fully trained advisers. They are supported by experienced nurses and paramedics, phone 111 (24 hours a day) web www.111.nhs.uk

#### **NHS** website

This website gives information and guidance on all aspects of health and healthcare. It can help you to take care of your child's health and wellbeing, web www.nhs.uk



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