

CT Colonography - extended bowel preparation

Information for patients

This leaflet answers some of the questions you may have about having a Computed Tomography Colonography (CTC) scan. It explains the risks and the benefits of this test and what you can expect when you come to hospital. It also explains how to prepare with the additional bowel preparation that your doctor has advised. This may be because you have previously had an unclear test or you have a known difficulty in clearing the bowel. If you have more questions at any time, please do not hesitate to ask a member of staff.

What is a CTC scan?

It is a type of x-ray that allows us to take 3D pictures of your large bowel (colon) and abdomen (tummy). It is also known as a virtual colonoscopy.

You lie on a scanning table and will have scans in two or three positions: on your back, on your side or laying on your front. So we can get a good view, before the scan we need to put some carbon dioxide gas into your colon to make it expand. We put the gas in through a small, thin tube that is put into your rectum (bottom).

How long does it take?

The scan usually takes about 20 to 30 minutes but you should expect to be at the hospital for about one hour.

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name** and **date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

If we don't ask these questions, then please ask us to check.
Ensuring your safety is our primary concern.

Why do I need this test?

Your hospital specialist has recommended you have this test. You usually have it to help us find the cause of your symptoms and to make a diagnosis. It is important that you understand why you are having this test. If you are not clear about the reasons, please check with the senior radiographer who sees you on the day of your test.

What are the benefits?

CTC is less invasive than a conventional colonoscopy and you might find that you can tolerate this procedure much more easily as it causes less discomfort and is quicker.

The special diet needed in preparation for CTC is more gentle than the dietary preparation for a colonoscopy. A CTC can help us to reach a diagnosis to make sure we give you - or you are already on - the best treatment.

What are the risks?

This test is very safe and serious complications are very rare.

When you have a CT scan you are exposed to a small amount of x-ray radiation equal to the natural radiation you get naturally from the atmosphere over about three years. The risk from this radiation dose is very low. **If you are, or think you may be, pregnant, you must call the department before your scan on 020 3299 3361.**

Mild abdominal discomfort and bloating: You may feel bloated and have tummy discomfort when the gas is put into your colon. We will check you during your procedure to make sure you are not too uncomfortable. The gas is absorbed quickly by your body and the symptoms do not take long to pass when the tubing is taken out of your bottom.

Dry mouth and blurred vision: You may be given a drug called Buscopan to relax your muscles and make the scan more comfortable. This can make your mouth feel dry and your sight slightly blurred. These symptoms normally last for about 15 to 20 minutes.

Eye pain and redness: Very rarely, Buscopan can cause **eye pain** or **redness** up to 24 hours after your test. If this happens, go immediately to your nearest Accident & Emergency department (A&E) for a checkup.

Bowel perforation: There is a very rare risk (about 1 in 3,000) of damaging your bowel during the test. If this happens, your bowel usually heals without treatment. But you may need to be admitted to hospital and observed in case you need surgery to repair the damage.

If you have any of the following symptoms within **four days** of your scan, please seek urgent medical advice from your GP. Out of hours, go straight to your nearest A&E.

- severe abdominal (tummy) pain
- painful tummy discomfort that gets worse
- sweating and nausea
- feeling generally unwell

Are there any alternatives?

Other tests include a colonoscopy. We cannot take samples with a CTC so if we find abnormalities you may need a colonoscopy. Discuss with the doctor who sent you for your CTC whether the other tests are more appropriate.

Consent

We must by law obtain your written consent to any operation and some other procedures beforehand. Staff will explain the risks, benefits and alternatives before they ask you to sign the consent form. If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to speak with a senior member of staff again.

Is it painful?

No, but you may have some mild tummy discomfort and bloating during the test from the gas we put in your colon.

Do I need to stop taking my medication?

If you take iron tablets, stop taking them four days before your test.

If you are diabetic, please do not take your diabetic medication from 4pm the day before your test until after your test is completed. If you have any questions regarding your diabetic medication, please contact your diabetes nurse specialist. It is advised to monitor blood glucose levels regularly to avoid hypoglycaemia.

If you are taking any other medications, you can take these as usual unless your doctor has advised you otherwise.

Please note: if you take an oral contraceptive, it may not work as well during this cycle. You must take other contraceptive precautions.

Do I need to prepare for the CTC?

We need to get a clear view of the inside of your colon so it must be as clean as possible. If we cannot get a clear view you may need to have the test again.

Over the two days before your test you need to:

- eat a special diet
- drink a liquid called Gastrografin and take a laxative medication

Please follow the instructions on 'How to prepare for your CTC' below:

How to prepare for your CTC scan

Laxatives and Gastrografin

We will give you a liquid called Gastrografin to drink at set times on the two days before your test. It is also a dye (contrast medium) that contains iodine and it helps to clearly show your colon on the scan. In addition, you will be given a laxative (Citrafleet) to take over the two days. You may need to go to the bathroom more after taking this so make sure you are close to a toilet.

The **Special diet preparation** instructions below explain how and when to take both the laxative and the Gastrografin.

If any of the following apply to you, do not begin the preparation and contact us on **020 3299 3361** or **020 3299 4909**:

- you have ever had an allergic reaction to x-ray dye (contrast medium) containing iodine
- you are allergic to sodium amidotrizoate or meglumine amidotrizoate
- you have a condition called overactive thyroid (hyperthyroidism)
- you have been diagnosed with a fluid/electrolyte imbalance
- you regularly choke or cough when swallowing fluids

Special diet preparation

You **must** follow this diet to clean your colon properly. If there is too much faeces in your bowel we will find it difficult to diagnose or monitor your condition and you may need to come back at a later date to have the test again.

Two days before your CTC scan

Breakfast

Tea or coffee, **no** milk or cream.

- one slice of white bread with a scraping of butter or margarine
- **or** one boiled or poached egg and one slice of dry white toast

You must drink as much clear liquid as possible throughout the next two days.

This can include water, fruit cordials, herbal tea, Bovril or fizzy drinks. You can drink tea or coffee with **no** milk or cream. As your food intake is reduced, you may find it necessary to have the occasional sugary drink.

Lunch

Choose **one** of the following:

- 100g of chicken, fish or similar meat substitute
- *or* two boiled/poached eggs

and

choose **one** of the following:

- two slices of white bread
- *or* two boiled potatoes, no skin
- *or* two tablespoons of cooked plain pasta/rice

After lunch you must not eat any solid food, milk or dairy products until after your procedure.

You can eat only non-solid foods, such as clear soups (meat extract, vegetable bouillon) or jelly as well as drinking clear juices, fizzy drinks and tea or coffee without milk.

At 2pm – Mix a Citrafleet sachet in a cup of tap water (approximately 150ml). Mix for 2 to 3 minutes, if solution becomes hot, wait for it to cool and then drink.

After 4pm – If you are diabetic please do not take any further medication until after your test. All other medication can be taken as normal.

At 7pm – Drink 50ml of Gastrografin mixed with an equal amount of water – you can add a little fruit juice or squash to improve the flavour.

One day before your CTC scan

Continue to eat only non-solid foods, such as clear soups (meat extract, vegetable bouillon) or jelly as well as drinking clear juices, fizzy drinks and tea or coffee without milk.

At 2pm – Mix a Citrafleet sachet in a cup of tap water (approximately 150ml). Mix for 2 to 3 minutes, if solution becomes hot, wait for it to cool and then drink.

At 7pm - Drink 50ml of Gastrografin mixed with the same amount of water - you can add a little fruit juice or squash to improve the flavour.

The day of your CTC scan

No solid food is allowed until after your examination. Drink as much clear liquid as possible, some of which may contain sugar.

If you have diabetes (Type 1 and Type 2)

If you need further advice, please contact your usual diabetes care provider.

You are at risk of having a hypo if you go without food for any length of time. To avoid this, please check your blood sugar regularly. You can drink clear fluids at any time, including fizzy drinks, fruit juice and Lucozade.

What happens before the test?

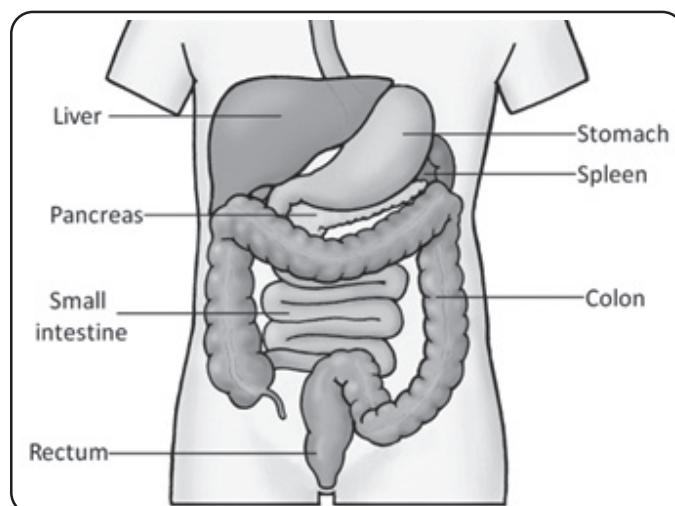
We will ask you to change into a hospital gown. You can bring a dressing gown to wear if you like.

You may have a cannula (thin plastic tube) put into a vein in your arm before you go into the scan room. This is so we can give you a muscle relaxant called Buscopan during the scan. It helps to reduce spasms in your bowel wall and can make the examination more comfortable. We may also use the cannula to inject a special x-ray dye (contrast medium) into your vein so we can get a better look at your colon. The dye usually causes you to feel a warm 'flush' pass around your body.

What happens during the test?

When you go into the scanning room, we will ask you some questions and explain the procedure to you. You can ask us questions at any time.

We will ask you to lie on your side on the scanning table. A senior radiographer will place a small, thin tube into your rectum (bottom). They then use a special machine to fill your colon with carbon dioxide gas through this tube.



When there is enough gas in your colon, you will have two scans: one with you lying on your back and one with you lying either on your side or on your tummy. Sometimes you may have a third scan so we can see the whole of your colon clearly.

What happens after the test? How will I get my results?

The hospital consultant/specialist looking after you at King's will send you an appointment letter asking you to come to an outpatient clinic to discuss your results. You usually get this within two weeks of your scan.

Who can I contact with queries and concerns?

If you have any questions, please contact us on **020 3299 3361** or **020 3299 4909**.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams. The PALS office is located on the ground floor of the Hambleton Wing, near the main entrance on Bessemer Road - staff will be happy to direct you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS

Tel: 020 3299 3601

Email: kch-tr.PALS@nhs.net

If you would like the information in this leaflet in a different language or format, please contact our Communications and Interpreting telephone line on 020 3299 4826 or email kch-tr.accessibility@nhs.net.