

Gastrocopy



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Gastrocopy is the endoscopy of the esophagus, the stomach, and the upper small intestine.

When is this procedure carried out? This procedure can clarify disorders of the upper digestive tract. These may include difficulty swallowing, pain behind the sternum, acid reflux, unpleasant feeling of fullness, nausea, unexplained vomiting, and the clarification of blood in the vomit or black stool. Also chronic deficiencies such as iron deficiency or vitamin deficiency can be clarified by the diagnosis of the upper gastrointestinal tract.

What are the single steps of a gastroscopy? Prior to the examination, we will conduct an informative consultation with you, during which we will explain the procedure and we will talk about your individual requests and risk factors. On the day of the procedure, you may not eat solid foods or drink any liquids. The endoscopy can be carried out in a twilight sleep or only with anesthetization of the pharynx, depending on your preference. The endoscope is inserted through the mouth and advanced into the duodenum. By injecting air into the digestive tract, the stomach unfolds thus enabling a good assessment of the mucous membrane. Depending on the problem and the resulting findings, samples can be retrieved, polyps removed, vessels can be cauterized by means of heat (argon plasma coagulation), and larger ulcers can be treated. The endoscopy of the upper digestive tract lasts about 10-15 minutes; if treatment is required, the procedure may take longer. During the twilight sleep phase you will be continuously monitored. After waking up, you will soon feel fit again. However, we would like to point out that, following the short-term anesthesia, your reaction time is impaired for 24 hours and you should not drive. Prior to the examination, please arrange for you to be picked up from our practice by a person of your choice and, if possible, not to remain alone at home after the procedure.