

## 結腸鏡檢查

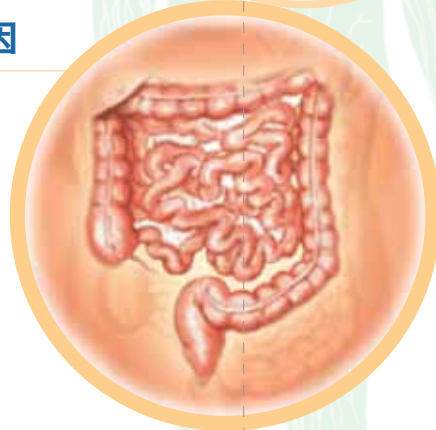
結腸鏡(又稱大腸鏡)是利用內窺鏡檢查大腸(結腸)內壁,內窺鏡本身是一條細小而柔軟可扭曲的管子(直徑大約1-1.5厘米),在管道的前端裝設有微形攝錄機,檢查時醫生會把內窺鏡從病人肛門推進入大腸內,透過同步視像檢查大腸內壁有否異常,如瘻肉和腫瘤等;如有需要,也可使用其他輔助儀器進行瘻肉切除或在懷疑患癌處抽取活細胞組織作進一步檢查。



## 需要接受結腸鏡檢查的原因

患有結腸病的病人,可能會出現下列一項或以上的症狀:

- 排便的習慣有所改變
- 近期出現肚瀉或便秘現象
- 大便帶血
- 長期下腹疼痛
- 大便後還有沒排清的感覺



## 結腸鏡普查

結腸癌是本港癌病中的第二號殺手,每年奪去超過一千五百條生命,早期結腸癌患者一般不會察覺任何病徵,直至癌病的後期病徵才出現,可惜這時往往治療會更加困難。結腸癌通常是由腸內壁增生的瘻肉演變而成,及早發現和切除瘻肉是可以預防結腸癌的形成,研究指出瘻肉及癌症的普查能減低死亡,而結腸內窺鏡是目前最有效的檢查方法,沒有病徵的人士如要接受結腸鏡普查大腸癌可作以下考慮:

- 如沒有直系親屬患過結腸癌,第一次結腸鏡檢查可在五十歲時開始;
- 如直系親屬曾患上結腸癌,檢查就應在更年青時開始(四十歲或更早)。

## 結腸鏡檢查前準備

- 為了得到理想的檢查結果,受檢者應在接受檢查前三至四天進食一些低纖維及少渣滓含量的食物;
- 在接受檢查前一天或當天,服用瀉藥潔淨腸道;
- 檢查前八小時停止進食;
- 病人如需長期服用藥物、患慢性病或對任何藥物敏感,請預先通知醫生;醫生或會建議病人在檢查前暫時停服某一些藥物。

## 結腸鏡檢查過程

- 醫生在檢查前會替病人注射鎮靜劑及止痛藥;
- 檢查時腹部會有輕微痛楚及腫脹,這是正常現象,檢查後會漸漸減退;
- 大部份結腸鏡可在十五至三十分鐘內完成,如發現有異常需進一步檢查,例如抽取活組織檢驗,時間會增長;
- 如發現有瘻肉的情況,醫生會把它切除;切除瘻肉或抽取活組織化驗,並不會引起病人不適;
- 與其他檢驗無異,結腸鏡檢查有它的風險,包括對麻醉藥/鎮靜劑之過敏反應、瘻肉切除引起之出血、腸道刺穿、感染、心肺問題等,但這些風險甚低。

## 結腸鏡檢查後的護理和注意事項

- 病人大約需要三十至六十分鐘後才完全甦醒;
- 病人於檢查後兩小時便可進食,在檢查過程中會注入氣體使腸道膨脹使檢查效果更理想,所以檢查後病人如頻頻放屁,屬正常現象;
- 病人在檢查後需由成人陪同離開,檢查後二十四小時內切勿駕駛車輛,乘腳踏車,操作器械或喝酒。

## 檢查結果

- 當檢查完畢後,醫生會向病人解釋結果;
- 如要進行活組織化驗或切除瘻肉,一般可在數天後得到化驗結果,病人可在一星期後約見醫生了解報告。



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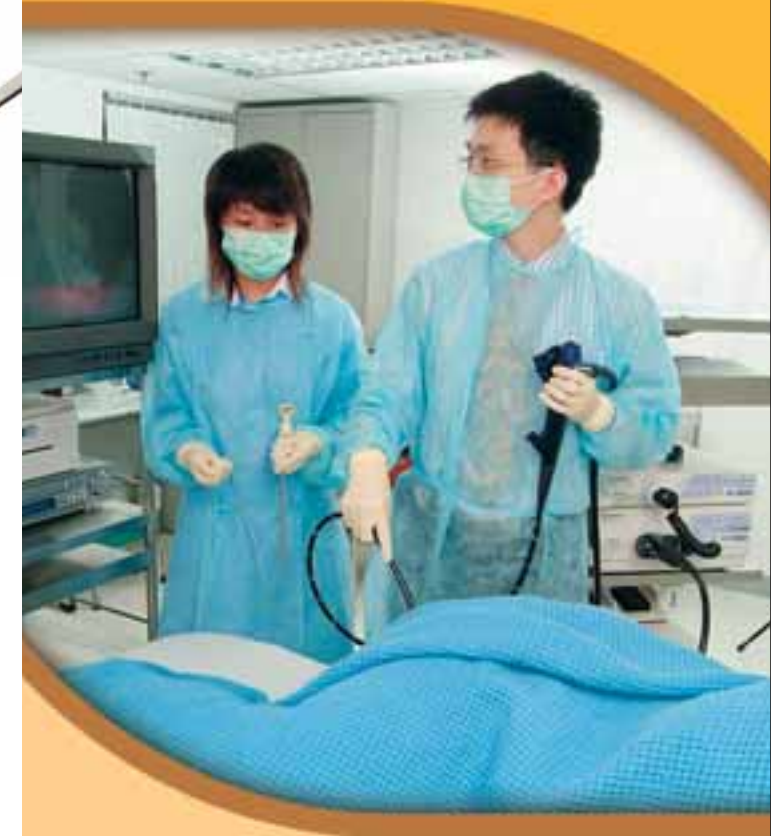
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# 結腸鏡檢查 COLONOSCOPY



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## Colonoscopy

Colonoscopy involves the use of an endoscope to examine the large intestine (colon). An endoscope is a flexible tube (about 1-1.5cm in diameter) that has a tiny video camera at the front end. It is introduced gently into the large intestine through the anus. Direct visual inspection of the inner lining of the intestine enables doctors to detect abnormalities such as polyps and cancer. Using accessory instruments, polyps can be removed and biopsy taken from suspected cancer tissue for further examination.

## What are the reasons for doing colonoscopy

Patients with diseases affecting the colon may have one or more of the following symptoms:

- Change in frequency of bowel movement
- Diarrhoea or constipation of recent onset
- Passing blood in stool
- Persistent lower abdominal pain
- Feeling of incomplete evacuation

## Screening for colon cancer

Colon cancer is the second most common cancer in Hong Kong and accounts for over 1500 deaths per year. Patients with colon cancer may not have symptom until the disease has reached advanced stages, when the treatment is difficult. The cancers usually develop from polyps, which are benign outgrowth from the bowel wall. Early detection and removal of polyps prevents development of colon cancer. Screening for colon polyps and cancer saves life and colonoscopy is the most sensitive method of screening. The current recommendations for screening in individuals without symptom are:

- Those with no relative having had colon cancer - screening should start at age 50;

- For those with first-degree relative having had colon cancer, screening should start even earlier (age 40 or earlier).

## Preparations for colonoscopy

- To optimize the condition for a satisfactory examination, individuals should have low-fibre diet during the 3-4 days leading up to the procedure.
- Bowel cleansing involves taking laxative to encourage bowel movement. This takes place on the day before or in the morning the procedure is performed.
- No oral intake for 8 hours before the procedure. Individuals should let the doctor know in advance if they are on regular medications, have any chronic illness or drug allergy. Some medications may need to be withheld temporarily before the procedure.

## The procedure itself

- Colonoscopy is normally done under sedation. Patient is given a sedative drug and an analgesic (pain killer) by injection before the procedure.

- The procedure may cause cramp and bloated sensation in the abdomen. This is normal and will go away after the procedure.
- Most colonoscopies take about 15-30 minutes to complete. It may take longer if the doctor finds abnormalities that necessitate further action.
- If a polyp is found, the doctor will also remove it. Tissue biopsy or removal of polyp does not cause pain or discomfort.

- Like many other investigative procedures, colonoscopy has its own risks, which include allergic reaction to sedative, bleeding from site of polyp removal, bowel perforation, infection, heart/lung problems and so forth. The risk, however, is low especially if no abnormality is found.

## After the colonoscopy

- It may take 30-60 minutes before patient recovers from the sedation.
- Patient may resume food or drinks after 2 hours.
- Patient may have the urge to pass wind after colonoscopy; again this is expected since air is used to distend the intestine during the procedure.
- Patient should be accompanied by an adult on leaving the clinic and must not drive, ride a bicycle, operate any machinery or drink alcohol within 24 hours of the colonoscopy.

## The findings

- Doctor will inform you of the findings after the procedure.
- If biopsy has been taken or polyp has been removed, it will take a few days for the tissue to be properly examined. Patient should make appointment to see the doctor in about a week to discuss the results.



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