What is Flexible Sigmoidoscopy?
Flexible sigmoidoscopy lets your doctor examine the lining of the rectum and a portion of the colon (large intestine) by inserting a flexible tube about the thickness of your finger into the anus and slowly advancing it into the rectum and lower part of the colon. If your doctor has recommended a flexible sigmoidoscopy, this brochure will give you a basic understanding of the procedure - how it is performed, how it can help, and what side effects you might experience. It can't answer all of your questions, since a lot depends of the individual patient and the doctor. Please ask your doctor about anything you don't understand.

What Preparation is Required?
Your doctor will tell you what cleansing routine to use. In general, preparation consists of one or two enemas prior to the procedure but could include laxatives or dietary modifications as well. However, in some circumstances your doctor might advise you to forgo any special preparation. Because the rectum and lower colon must be completely empty for the procedure to be accurate, it's important to follow your doctor's instructions carefully.

Should I Continue My Current Medications?
Most medications can be continued as usual. Inform your doctor about medications that you're taking - particularly aspirin products or anticoagulants (blood thinners) - as well as any allergies you have to medications. Also, tell your doctor if you require antibiotics prior to dental procedures, because you might need antibiotics prior to sigmoidoscopy as well.

What To Expect During Flexible Sigmoidoscopy
Flexible sigmoidoscopy is usually well-tolerated. You might experience a feeling of pressure, bloating or cramping during the procedure. You will lie on your side while your doctor advances the sigmoidoscope through the rectum and colon. As your doctor withdraws the instrument, your doctor will carefully examine the lining of the intestine.

**What If The Flexible Sigmoidoscopy Finds Something Abnormal?**
If your doctor sees an area that needs further evaluation, your doctor might take a biopsy (sample of the colon lining) to be analyzed. Biopsies are used to identify many conditions, and your doctor might order one even if he or she doesn't suspect cancer.

If your doctor finds polyps, he or she might take a biopsy of them as well. Polyps, which are growths from the lining of the colon, vary in size and types. Polyps known as ‘hyperplastic’ might not require removal, but benign polyps known as ‘adenomas’ are potentially precancerous. Your doctor might ask you to have a colonoscopy (a complete examination of the colon) to remove any large polyps or any small adenomas.

**What Happens After a Flexible Sigmoidoscopy?**
Your doctor will explain the results to you when the procedure is done. You might feel bloating or some mild cramping because of the air that was passed into the colon during the examination. This will disappear quickly when you pass gas. You should be able to eat and resume your normal activities after leaving your doctor's office or the hospital, assuming you did not receive any sedative medication.

**Possible Complications of Flexible Sigmoidoscopy**
Flexible sigmoidoscopy and biopsy are safe when performed by doctors who are specially trained and experienced in these endoscopic procedures. Complications are rare, but it's important for you to recognize early signs of possible complications. Contact your doctor if you notice severe abdominal pain, fevers and chills, or rectal bleeding of more than one-half cup. Note that rectal bleeding can occur several days after the biopsy.