

Colonoscopy:

A colonoscopy is an examination of the colon using a long, flexible tube called a colonoscope. Following intravenous sedation of the patient, the colonoscope is inserted by the gastroenterologist through the rectum into the large intestine (colon) allowing him to carefully examine the lining of the colon.

If the gastroenterologist sees a suspicious area, or needs to evaluate an area in greater detail, he can pass an instrument through the colonoscope and take a small piece of tissue (biopsy) for examination in the pathology laboratory. Biopsies are taken for many reasons and do not necessarily mean that cancer is suspected.

Frequently, a polyp may be encountered by the gastroenterologist during a colonoscopy. Polyps are abnormal growths of tissue which vary in size from a tiny dot to several inches. All polyps seen during a colonoscopy are biopsied or removed by the gastroenterologist, as some polyps may progress to cancer. The removal of polyps (polypectomy) is performed by passing a wire loop (snare) through the colonoscope and severing the attachment of the polyp from the intestinal wall by passing an electric current through the wire (cautery). The patient does not experience any discomfort during or after removal of such a polyp.

The removal of polyps during a colonoscopy has been shown to be vital in the prevention of colon cancer.