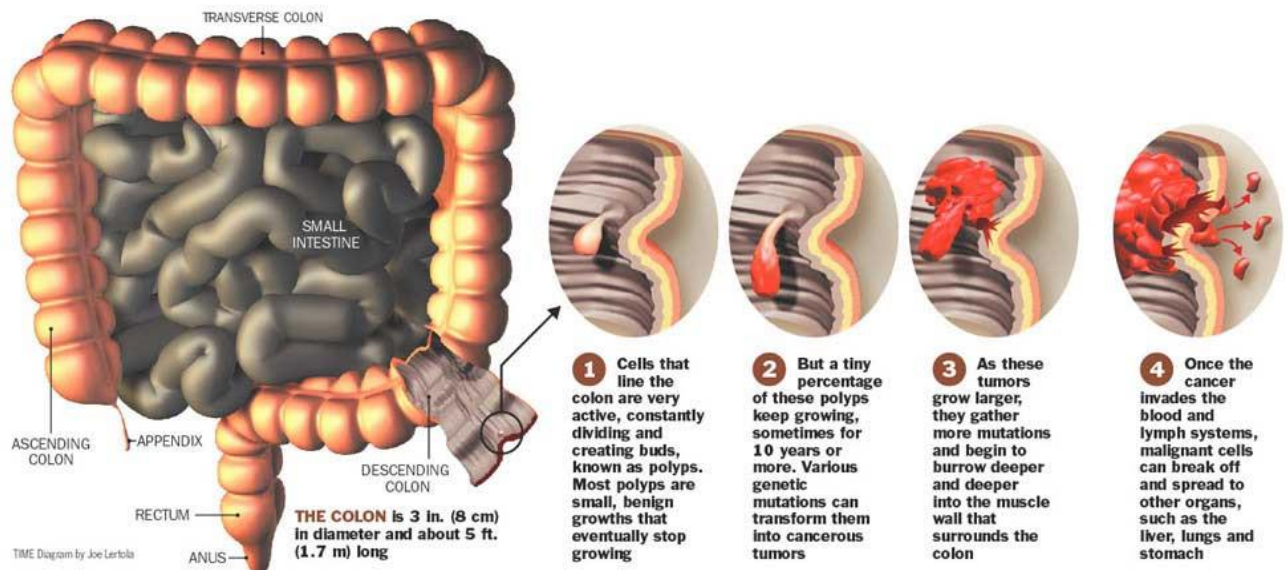


Patient Information : Colonic Polyps

A polyp in the gut is a growth of tissue that protrudes into the lumen of the bowel. The vast majority of polyps occur in the colon where they may be a precursor of bowel cancer:



Polyps in the colon are of 2 types:

1. Neoplastic (adenomas and malignant polyps)
2. Non neoplastic polyps (hyperplastic and inflammatory polyps)

The differentiation can only be made by examination under the microscope after removal of the polyp. The importance of neoplastic polyps is that most bowel cancers start in these polyps. Most neoplastic polyps are called adenomas, if the adenoma is less than 1 cm in size it is unlikely to harbor any cancerous cells however this can be confirmed by examination under the microscope. Small polyps are also unlikely to undergo any change within 1- 3 years. If the polyp is confirmed as an adenoma then further colonoscopies are required in the future as new polyps can develop. Non-neoplastic polyps usually do not need further screening colonoscopies. Most polyps are small (less than 1 cm in diameter) and do not cause any symptoms, they can however bleed or cause pain if the polyp is large.

Snaring the base with a wire and passing a heated current to cut the polyp off and sealing any bleeding points, remove polyps. We retrieve the polyp for pathology.

Complications that may occur after polypectomy are uncommon but include: 1. Perforation of the bowel causing worsening abdominal pain (not just wind pain) 2. Bleeding from the polyp site causing a lot of blood in the stool; either of these complications can occur soon after polypectomy or up to 2 weeks later.

If possible, avoid aspirin or arthritis medication intake for 2 weeks. (If you are unsure if it is safe to stop your aspirin or not check with your doctor.)

If you are worried about any untoward symptoms contact us on 93871738 or after hours attend your local medical practitioner or nearest hospital, remember to take the procedure report with you.