

What will happen if the scan identifies polyps or cancer?

Virtual colonoscopy is a diagnostic, not therapeutic, technique. If the virtual colonoscopy finds that you have polyps, you may need to have either a conventional colonoscopy or a sigmoidoscopy to remove them.

Large polyps or cancer may need surgery to remove them. In many people bowel cancer can be cured with surgery.

Deciding on taking the test

Virtual colonoscopy is a commonly performed and generally safe procedure. However, in order to make a well-informed decision and give your consent, you need to be aware of the possible side-effects and the risk of complications.

Side-effects are the unwanted but mostly temporary effects of a successful procedure. If you have a virtual colonoscopy, you may feel mild tummy

pain, similar to wind pains, but this should clear up quite quickly

Complications are unexpected problems that can occur during or after the procedure. Most people are not affected. A virtual colonoscopy carries risks of developing complications such as damage to, or perforation of, the colon during the procedure. This can lead to bleeding and infection, which may require treatment with medicines or surgery. However, the risk of this is significantly less than for a conventional colonoscopy.

The chance of complications depends on the exact type of procedure that is being performed and other factors such as your general health. The centre will be able to explain how these apply to you.

Related BUPA factsheets

- Bowel cancer
- Colonoscopy
- CT scan

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Virtual colonoscopy

This factsheet is for people who are considering having a virtual colonoscopy.

Virtual colonoscopy (also called a computerised tomography colonography or CT colonography) is a new method that allows doctors to look at the large bowel (colon) to detect polyps and signs of cancer. The CT scanner uses X-rays to produce two-dimensional and three-dimensional images of the whole of the colon and rectum.

The large bowel

The large bowel, also called the colon, is the lower part of your intestines. It absorbs water and nutrients from digested food that passes through it.

Your colon has three sections: the ascending, transverse and descending colon (see diagram). The rectum, at the end of your colon, is where faeces collect before they go out through your anus as a bowel movement.

Polyps

A polyp is a small ball of tissue that can grow on the inside of the bowel wall.

Polyps are formed by an overgrowth of cells from the bowel wall, known as an adenoma. They are harmless but can sometimes turn into cancer

(a malignant tumour). Most large bowel cancers are thought to develop from a pre-existing polyp.

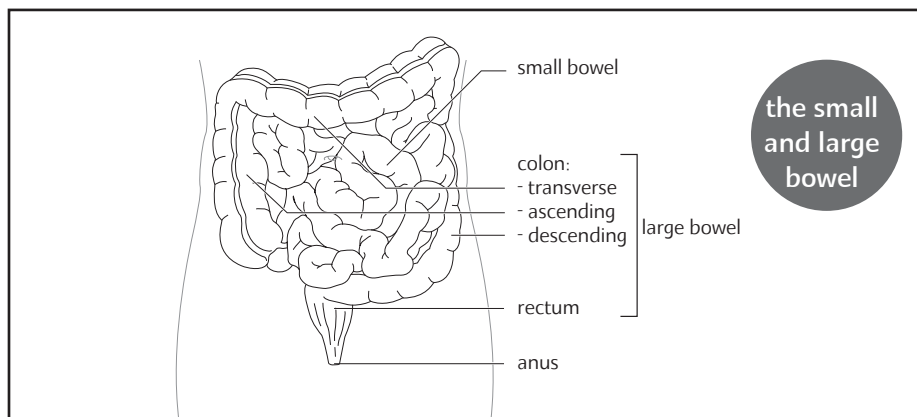
Why have a virtual colonoscopy?

A virtual colonoscopy can examine the colon and rectum and detect abnormalities such as polyps and signs of bowel cancer.

In the UK, bowel cancer is the third most common cancer in men (after prostate and lung cancer). It is the second most common cancer in women (after breast cancer). There is a good chance that bowel cancer can be cured if diagnosed and treated early.

Screening

Virtual colonoscopy can be used to examine the bowel of people with



symptoms of bowel cancer and to screen individuals that are at risk of bowel cancer.

What are the alternatives?

There are other screening tests that can detect cancers and polyps. These include the following.

- Conventional colonoscopy, in which a thin tube with a bright light at the end is put into the back passage and moved up the colon. The doctor will look through the tube to see the inside of the rectum and colon.
- Sigmoidoscopy, which is a less invasive technique than a colonoscopy, but only looks at the lower part of the bowel. If this test does not find a cause for your symptoms, then a colonoscopy or virtual colonoscopy may still be necessary.
- Barium enema, which involves placing a fluid containing barium (a substance that shows up on X-rays) into the bowel via the rectum. X-ray pictures of

your abdomen can then show the inside of your bowel more clearly.

Each of these tests has its advantages and disadvantages.

Virtual colonoscopy usually allows your doctor to have a clear look at the inside of your bowel, without the need for sedation and with minimal side-effects.

What happens before a virtual colonoscopy?

The centre will give you information on how to prepare beforehand.

Your bowel will need to be cleaned before the test. To do this you will need to follow a "low residue" diet for a few days before the procedure and taking a laxative. A low-residue diet is a diet that's low in fibre (eg bread, pasta and cereals).

The virtual colonoscopy

The test is done using a CT scanner. The CT scan takes about 10 to 20 minutes and will be performed by a skilled

technician (a radiographer). The scan results will then be interpreted by a doctor specialising in scanning techniques (a radiologist).

You won't need to have a general anaesthetic or sedative.

The virtual colonoscopy procedure will begin by having a small rectal tube placed in your rectum. Carbon dioxide will be introduced into your colon to make the lining easier to see.

Most people feel only a little discomfort as the tube is carefully inserted into the back passage. You may briefly feel pain similar to having wind and the urge to go to the toilet, but as the colon is empty, this will not be possible. Most people pass some wind. There is no need to feel embarrassed about this as the staff expect it to happen.

You will need to be scanned twice - once while you lie on your back and again while you lie on your stomach. You will need to keep very still and hold your breath for a few seconds during the scan.

The computer produces two-dimensional pictures which are carefully examined by your radiologist, who is specially trained to pick up abnormalities such as polyps or cancer. A three-dimensional image of the inside of your colon is also produced and a virtual tour of the colon can be performed giving pictures similar to those seen in conventional colonoscopy.

After the test

You will be able to leave the scanning centre immediately after the test.

The carbon dioxide used to inflate your bowel will usually be absorbed, so you shouldn't have much discomfort or wind after your test.

Your radiologist will analyse the CT images and send the results to your BUPA doctor.

If your doctor finds a problem with your scan, he or she will advise you on the next steps to take. Depending on your scan results, your doctor may refer you directly to a specialist, or recommend that you have another scan.

The CT scan also shows other organs within the abdomen, so it's possible that it will pick up problems within these organs. If this happens, your doctor will be able to give you further advice.

As with any test, including conventional colonoscopy, there are no guarantees that all significant growths in your bowel will be picked up. Also, even with a correctly performed scan it is possible to pick up growths which are not significant.

Recovering from a virtual colonoscopy

You can resume normal activities immediately after the virtual colonoscopy and can eat, work and drive without a delay.