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Upper Endoscopy

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What is an upper endoscopy?

An upper endoscopy is a procedure a doctor uses to look at the inner lining of the upper digestive tract (the esophagus, stomach, and duodenum, which is the first part of the small intestine).

This test is also sometimes called an **esophagogastroduodenoscopy**, or **EGD**.

This procedure is done with an **endoscope**, a thin, flexible tube with a light and a small video camera on the end. The tube is put in through your mouth, down your throat, and into your esophagus, stomach, and small intestine.

Why do you need an upper endoscopy?

There are a few reasons you might need an upper endoscopy:

You are having problems in your upper digestive tract

This test can be used to look for the causes of problems in the esophagus, stomach, or duodenum. It might be done because of symptoms you are having (such as trouble swallowing, heartburn, feeling full quickly, or coughing up or vomiting blood). Or it might be done to look at an abnormal area seen on an imaging test (such as an x-ray¹ or CT scan²).

What's it like to have an upper endoscopy?

This is a general outline of what typically happens before, during, and after an upper endoscopy. But your experience might be a little different, depending on why you're having the test, where you're having the test done, and your overall health. **Be sure to talk to your health care provider before having this test so you understand what to expect, and ask questions if there's anything you're not sure about.**

Before the test

The procedure usually takes about 15 to 30 minutes, but it might take longer, depending on what's being done.

After the test

After the procedure, you will be watched closely to make sure you don't have any complications. If you got a sedative, you might not remember the procedure.

Because air is often put into your stomach as part of the procedure, you might feel bloated or crampy afterward.

Your mouth and throat will probably be numb for a couple of hours. You won't be allowed to eat or drink until the numbness wears off. Once the numbness is gone, you may have a sore throat, cough, or hoarseness for the next day or so.

If you had the procedure as an outpatient, you will probably be able to go home after a few hours, but you will likely need a ride home because of the medicines or anesthesia you received. Your doctor or nurse should give you specific instructions on what you can and can't do in the hours after the test.

If biopsies were done as part of the procedure, the results will typically be available within a few days, although some tests on the biopsy samples might take longer. You will need to follow up with your doctor after the procedure to get your results.

Possible complications of upper endoscopy

Upper endoscopy is usually safe, but there is a small risk of:

- Bleeding from a place where the doctor removed tissue samples
- Perforation (puncture) of the lining of the digestive tract
- Reactions to anesthesia

Bleeding is often minor and goes away on its own, but if not, it might need to be treated. Surgery might be needed to fix a perforation.

Before you go home, your doctor or nurse should give you specific instructions on when you might need to call the doctor's office for problems. Be sure you understand when you should call.

Hyperlinks

- 1. <u>www.cancer.org/cancer/diagnosis-staging/tests/imaging-tests/x-rays-and-other-radiographic-tests.html</u>
- 2. <u>www.cancer.org/cancer/diagnosis-staging/tests/imaging-tests/ct-scan-for-</u> <u>cancer.html</u>

References

American Society for Gastrointestinal Endoscopy. Understanding Upper Endoscopy. Accessed at https://www.asge.org/home/for-patients/patient-information/understanding-upper-endoscopy on November 27, 2018.

National Institute of Diabetes and Digestive and Kidney Diseases. Upper GI Endoscopy. 2017. Accessed at https://www.niddk.nih.gov/health-information/diagnostic-tests/upper-gi-endoscopy on November 27, 2018.

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