

30th World Congress on

ADVANCED NURSING PRACTICE

September 04-06, 2017 | Edinburgh, Scotland

The child and child's perspective of bowel cleansing prior to the colonoscopy

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The purpose of this presentation is to present the child/child's perspective of going through a colonoscopy based on the result from studies performed in by Vejzovic et al. 2015. The children with symptoms of inflammatory bowel disease (IBD) must often be subjected to a series of diagnostic tests, including abdominal CT, upper endoscopy, and colonoscopy with biopsies. In many paediatric centres, children undergo a combined upper endoscopy, colonoscopy, and terminal ileoscopy as the initial diagnostic procedure. The colonoscopy examination is today the gold standard for the diagnosis of paediatric IBD. It is a routine endoscopic non-surgical investigation of the colon and the outermost part of the small intestine. The investigation is considered effective and safe for children of all ages, and it is normally performed while the child is under anaesthesia. The role of colonoscopy is crucial for the diagnosis and monitoring of paediatric gastroenterology with as clean a bowel as possible for the appropriate detection of bowel disorders. The ESPGHAN working group generally recommend polyethylene glycol (PEG) as a standard laxative, due to its cleansing efficacy. There are several studies which found that the intake of large volumes of bad-tasting laxative (PEG) was the most difficult part of the procedure prior to colonoscopy from both.

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