Patient information





Polyps of the Bowel and Rectum

 Important information for all patients experiencing polyps of the bowel and rectum.

Golden Jubilee National Hospital Agamemnon Street Clydebank, G81 4DY The construction of the construction

Reviewed: May 2021 Next review: May 2022 Version 5 The purpose of this booklet is to tell you about Polyps of the Bowel and Rectum, their causes and treatments.

What is a polyp?

A polyp is a protrusion or bump on the lining of the large bowel caused by an abnormal production of cells. Polyps are common, occurring in 15-20% of the adult population. Most polyps are benign (non-cancerous). If left in the bowel for a long time (years), they can become cancerous.

Symptoms of polyps

Most people are unaware of having polyps. They are incidental findings on x-ray or colonoscopy. Sometimes, however, they do produce symptoms. Very rarely, polyps can cause abdominal pain or change of bowel habit. The most common symptoms are bleeding and mucous with the bowel motions.

Treatment

Since there is no foolproof way of predicting whether or not a polyp is or will become cancerous, total removal is advised. A very small number of polyps require surgical removal. If this is required, your consultant will discuss this with you. The vast majority can be removed during a colonoscopy or flexible sigmoidoscopy procedure.

The polyps are removed using a snare or a wire loop, with an electrical current. This is not painful and is usually performed as a day surgery procedure.

Complications

For most patients, polyp removal is very straightforward. However, complications can sometimes occur.

- Bleeding (1 in 500).
- Perforation (hole in the bowel) (1 in 1000). For larger polyps, this can be as common as one in 25.

Sometimes problems will be obvious immediately. In other cases, however, it can take a day or two. If you have heavy bleeding, abdominal pain or fevers once you return home, contact your GP or local hospital immediately.

Can polyps recur?

The chance of a polyp recurring is very small, (30% of patients). The chances of a polyp coming back or new polyps forming depends on the type of cells present in the polyp you have had removed. Based on the results of your colonoscopy / flexible sigmoidoscopy, your consultant will advise when you should have another procedure performed to remove any polyps that have formed or recurred.

Your GP or consultant can answer any other questions that you may have. You may have surveillance scope in a few years after polyps have been removed.

Contact

If you have any problems or questions, please contact the day unit via the switchboard on 0141 951 5000. The day unit operates Monday to Friday 7.30am to 8pm but please only telephone the unit between the hours of 8am and 7pm. Outwith these hours you should contact the Senior Nurse via the switchboard as well. If you have to visit your GP or your nearest hospital accident and emergency, please take a copy of your endoscopy report with you.

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