E.U.A. OF RECTUM

This leaflet is produced by the Department of Colorectal Surgery at Beaumont Hospital supported by an unrestricted grant to better Beaumont from the Beaumont Hospital Cancer Research and Development Trust.

This information leaflet has been designed to give you general guidelines and advice regarding your surgery. Not all of this information may be relevant to your circumstances. Please discuss any queries with your doctor or nurse.

YOUR PROCEDURE EXPLAINED
What is an E.U.A.?

A EUA is an examination under anaesthetic. You may need a general anaesthetic to allow your doctor examine your back passage as it may be too uncomfortable to do so in the outpatient clinic without sedation or a general anaesthetic. This is usually carried out as a day case procedure. You will come to the Day ward on the morning of your procedure. You will usually be able to go home the same day once you have recovered from your anaesthetic.

The purpose of having a EUA of rectum (back passage) is to investigate and treat, if possible certain symptoms which you may be experiencing for example:

- Bleeding or discharge from your back passage
- Pain in your back passage
- Altered bowel habit eg. Diarrhoea/constipation

Procedures which may be carried out during a EUA if necessary:

- Rectal biopsy – this is a procedure to take a small sample of tissue from the back passage which will be sent to the laboratory for analysis.
- Injection of haemorrhoids - haemorrhoids are swellings that can occur inside and around the back passage which can result in bleeding. A chemical solution (phenol in oil) can be injected into the base of the haemorrhoid which should result in the blood flow being cut off to the haemorrhoid.
- Other procedures may be performed during an EUA if necessary. Your surgeon will discuss this with you.

How do you prepare for this procedure?

You will have a discussion with your doctor regarding your procedure. The procedure will be fully explained to you. You may attend the day ward for pre-assesment prior to coming into hospital for your procedure. A number of tests may be preformed to ensure you are medically fit for an anaesthetic eg. Blood tests, chest x-ray, ECG (tracing of your heart). You will be admitted to the hospital on the day of your procedure, where you will meet a doctor and a nurse who will prepare you for theatre. From there you will be brought to theatre, where you will meet the theatre staff and your anaesthetist. Please leave all valuables at home and arrange to have anything you need brought to you later in the day. Once you have recovered from the anaesthetic and have tolerated diet you should be able to leave the hospital on the same day.

What happens after theatre?

Immediately after your procedure you will be brought into a recovery room attached to the theatre. You will be monitored closely by the nursing staff until you are ready to be brought to the ward. On return to the ward you may feel quite sleepy following the anaesthetic. The nurses on the ward will help you feel comfortable and regularly check on you.
You will have a small plastic tube (cannula) in one of the veins of your arm to give you fluids. This will be removed once you are drinking enough oral fluids. You may experience some nausea (sickness) or potentially vomit. This can be caused by the anaesthetic agents or drugs used in the operation. You will be given some anti-sickness medicine if needed.

You may eat and drink as soon as you like after your procedure. Once you are tolerating oral fluids and diet and you have passed urine you may be fit for discharge home. You will need to be accompanied home and be in the care of a responsible adult for 24 hours following your anaesthetic.

You may experience some small amounts of bleeding from your back passage following this procedure, which is normal.

**Complications**

- Excessive pain which cannot be controlled by over the counter painkillers.
- Continuous or excessive bleeding.
- Possible infection - symptoms of which are high temperature, feeling unwell, an increase in pain or discharge.

You will usually be seen back in the out patient department after 6 weeks, you may be brought back sooner if needed. This appointment will be arranged for you.

**What if I have a problem at home?**

Contact your GP

or

Contact the Dayward  ph. 8092826/ 8092984 (Mon/Fri 8am-6pm)

After hours, ring 8093000

Ask for a member of your team or the General Surgical SHO on call.

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