### **Patient information**

This information sheet is intended for any one due to have an endoscopy procedure and who is currently taking a therapy to reduce their risk of developing blood clots.

This information sheet shares information from approved guidelines developed by the British Society of Gastroenterology (BSG) and European Society of Gastrointestinal Endoscopy (ESGE) guideline update 2021.

#### The procedure:

**Gastrointestinal endoscopy** is the examination of the oesophagus, stomach, small or large bowel.

To be able to look at these areas of the body your clinical team will need use a special device which has a tiny camera on the end that can be inserted into your body and provide visual images for the specialist to see as it is moved across the area they need to examine.

The endoscopy camera is fixed to a very flexible tube and is not only able to be moved easily but can also take tissue samples and perform minor surgical-type procedures within the body.

The procedure is used to diagnose and treat a variety of gastrointestinal conditions including cancers, ulcers, polyps, and blockages due to gallstones.

It is important for anyone due to have a gastrointestinal endoscopy and who is taking an antiplatelet or anticoagulant therapy, to discuss this with their clinician.

# Antiplatelet and anticoagulation therapy:

Most commonly used therapies are listed below, however if you have any queries, please ask your clinician.

### Antiplatelet drugs include:

- aspirin
- clopidogrel
- prasugrel
- ticagrelor

They are used to help prevent heart attacks, strokes, and blockage of blood vessels in limbs, in patients who are at risk of these conditions.

### Anticoagulant drugs include:

- warfarin
- heparin
- rivaroxaban
- apixaban
- edoxaban
- dabigatran

They are used to prevent blood clots and strokes in at-risk patients with a variety of conditions including atrial fibrillation (AF), mechanical replacement heart valves, deep vein thrombosis (DVT), and pulmonary embolus (PE).

Risks to patients on antiplatelet or anticoagulant drugs undergoing endoscopy: Antiplatelet and anticoagulation drugs reduce clotting of the blood and are used for certain medical conditions where risk of blood clots are increased.

The body naturally forms blood clots to help us heal such as after a fall when the skin has broken or after a cut. These type of natural blood clots are a safety mechanism by the body to stop bleeding. However, when the body forms unwanted clots that can be dangerous, antiplatelet or anticoagulant help to reduce the ability of the blood to clot so quickly and so reduces the risk of dangerous blood clots for the individual.

After a procedure such gastrointestinal endoscopy, the body may need to form safe clots to help in the healing process, therefore it is sometimes necessary to consider temporarily stopping antiplatelet or anticoagulant therapy so that the normal clotting response to bleeding after some endoscopic procedures can occur.

If you are taking an antiplatelet or anticoagulant therapy, it is important for you and your doctor to discuss whether you will need to temporarily stop the therapy.

## Questions and information that may be helpful to discuss with your clinician:

## (i) Before endoscopy:

- Which endoscopy procedure will I be having and how will it help me?
- Are there any risks to the procedure?
- Which antiplatelet or anticoagulant drug(s) am I taking?
- Can I safely continue my medication for while undergoing the endoscopy procedure
- If I temporarily stop or change some or all of my medication for endoscopy, what are the risks?
- Is there an alternative investigation that does not require a change to my medication?

### (ii) If you consider pausing anticoagulant or antiplatelet therapy:

- The benefits of temporarily stopping antiplatelet or anticoagulant therapy?
- Any risks involved in stopping therapy and what this means for you?
- The length of time you may be advised to pause your therapy.
- Signs to be aware of and what to do if you have any concerns?

# (iii) If change to my medication is required:

- Which drug(s) do I need to stop or change?
- What day do I take the last dose of each drug?
- What day do I start any alternative medication?
- Do I need any tests to check my blood clotting, and when should this be done?

#### (iv) After endoscopy:

- What day/time do I restart my usual medication?
- What day/time do I stop any temporary alternative medication?
- What complications might occur after endoscopy?
- What are the signs of any complications?
- Who, when, and how should I seek help or advice if I suspect a complication following endoscopy?

This guidance is endorsed by the charities Anticoagulation UK (<a href="www.anticoagulationuk.org">www.anticoagulationuk.org</a>) and Thrombosis UK (<a href="www.thrombosisuk.org">www.thrombosisuk.org</a>), which support and educate patients and health professionals about medical conditions associated with blood clotting, and the drugs used to treat these conditions.

A full copy of the guideline is available at www.bsq.orq.uk/resource-type/quidelines