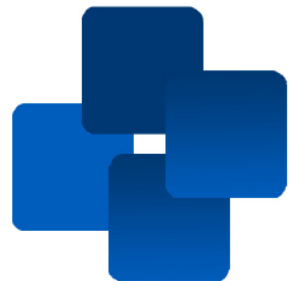


# **Patient Information**

## **Endoscopic Mucosal Resection (EMR)**

**NHS Bowel Cancer Screening  
Programme (BCSP)**



## What is an endoscopic mucosal resection (EMR)?

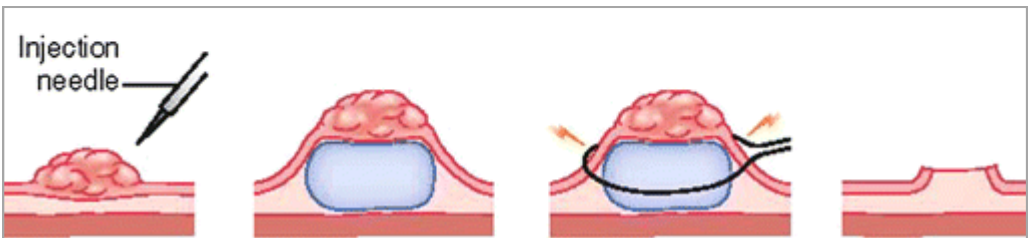
An EMR is a therapeutic technique which can be done as a day case procedure and is a safe and efficient alternative to surgery for removal of large polyps. This will be done using the colonoscope (camera).

A cushion of fluid will be injected under the polyp, and when it has lifted away from the muscle layer of the bowel, it will be removed using a wire (snare) - please see the diagram below. An electrical current passed through the wire will burn through the tissue and seal any blood vessels that may bleed.

Some polyps may have to be removed in pieces. If removed in pieces you will require further follow up procedures to check there isn't recurrence of the polyp.

The separation of the polyp from the muscle layer of the bowel allows the resection of polyp and reduces the risk of perforation and thermal injury to the bowel wall.

Other devices that may be used are clips and/or loops. Once removed, the abnormal tissue will be collected and sent away for testing.



## Why do I need an EMR?

You have been referred for an EMR because we found a large polyp at your colonoscopy. Large polyps are 20mm or greater in size and carry an increased risk of colorectal cancer. These can be challenging to remove endoscopically and are associated with an increased risk of complications and incomplete excision (removal).

## What are the risks?

Most procedures are straightforward, however, there is always risk of complications, such as:

- Perforation - 1-2% ( in some cases surgery and formation of stoma may be required)
- Immediate bleeding - up to 11% (rarely serious and readily treated)
- Delayed bleeding - up to 7% (up to 14 days after the procedure).
  - In some cases a blood transfusion may be required.
- Post polypectomy syndrome - less than 5%
  - This is where the diathermy (heat) that we use during the procedure causes thermal (heat) injury and you develop abdominal pain, fever after the procedure but a perforation didn't occur.
- Recurrence at follow-up - 10% - 30%
- Incomplete removal - where further endoscopic resection or an operation may be required.
  - Risk factors for residual or recurrent adenoma after EMR include polyp size >40mm piecemeal resection, bleeding during the procedure and high-grade changes in the resection specimen.
- Narrowing/stricturing - removing large polyps (i.e.  $\geq 75\%$  of circumference) can lead to scarring and narrowing.

## How long will I be in the department?

The procedure can take a long time - anything between 30 minutes to 2 hours.

You could experience more discomfort than your last colonoscopy. Very occasionally you may need to be admitted to a ward for observation following removal of a large polyp, particularly in the event of any complication.

You may want to bring a small overnight bag with you containing toiletries, nightwear and any medication that you take, just in case.

## What happens after the EMR?

After the procedure you will be taken to a recovery bay to rest and recover. If you go to the toilet and pass any blood, then please let the nurse looking after you know.

Before you leave the unit you will be seen by a specialist screening practitioner who will give you information about your recovery at home and provide emergency telephone contact numbers.

## When can I return to my normal activities?

You may eat and drink as normal after your procedure unless advised otherwise.

### **In the first 24 hours after procedure:**

- Have someone with you in case any complication arises.
- Have someone to help you if you care for children or dependents.

### **In the following 2 weeks after procedure:**

- Avoid any strenuous activities, such as running and heavy lifting.
- Avoid any air travel (especially long haul flights).

## Side effects to look out for at home, and when to contact NHS 111 or attend the Emergency Department.

The side effects to look out for are:

- Fever - feeling hot or cold.
- Nausea and/or vomiting.
- Persistent abdominal pain that doesn't go, even after taking paracetamol.
- Heavy bleeding - if you notice persistent, large quantity of bleeding.
- Feeling faint or generally unwell.

**It is very important you do not ignore these symptoms.**

If you have to see a doctor or are admitted to hospital with any of the above symptoms, please contact the **Bowel Cancer Screening Office** on **01438 285770**.

## Are there alternatives?

The alternatives to having the EMR procedure are:

- **To leave it alone**

Large polyps carry an increased risk of colorectal cancer. This is why we would recommend to have the polyp removed to prevent its development into a cancer. Instances where we would leave it alone is when the individual is unwell, too frail, or where it is the individual's choice.

- **Transanal Minimally Invasive Surgery (TAMIS)** - for removal of polyps in the rectum.

The advantage is that the polyp is removed in one single piece. The disadvantages are the risks of general anaesthesia, recovery period and potential post surgery complications.

This would be a definitive and usually a one-step procedure.

If the EMR is unsuccessful then you may be referred for surgery for removal of the polyp.

- **Endoscopic Submucosal Dissection (ESD)**

An endoscopic procedure that removes the polyp in one piece. It is a technically more specialised procedure than the EMR and there are very few endoscopy centres where the procedure is done. If our consultants feel that this is the most suitable procedure for removal of your polyp, you will be referred to the closest centre where this procedure is performed.

- **Bowel Surgery**

In some cases, a section of bowel has to be removed and potentially there is a formation of stoma.

## What if I have any questions?

If you have any questions or concerns, please speak to a member of the nursing team.

**Please use this space to write down any notes or questions you may wish to ask:**

## Useful Contact Details

**Bowel Cancer Screening Office (BCSP)**

**☎ 01438 285770**

Lister Hospital

Coreys Mill Lane

Stevenage

Hertfordshire SG1 4AB

(This is not an emergency number. Messages left on the answerphone may not be answered for 24-48hrs).

NHS 111 can help if you have an urgent medical problem and you're not sure what to do. It is available 24 hours a day, 7 days a week.

**☎ 111**



Date of publication: August 2023  
Author: CA/BCSP team  
Reference: Version: 01  
Review Date: August 2026  
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