

Capsule Endoscopy

You have been asked to have a test called a capsule endoscopy, also called a 'Pill Cam'.

What is capsule endoscopy?

Capsule endoscopy is also known as pill-camera or wireless endoscopy. It is mainly used to pinpoint bleeding in hidden areas in the small bowel that cannot be reached with gastroscopy or colonoscopy. It is more accurate than many other techniques. Capsule endoscopy finds a source of bleeding in about 60–70% of patients. It is also useful for finding tumours in the small bowel and in some cases of inflammatory bowel disease.

The capsule is quite small and easily swallowed. It contains a tiny camera, batteries, a light source and a transmitter. After being swallowed, the capsule travels like a piece of food through the gut. It takes high-quality pictures of the stomach and small intestine, taking two pictures every second for up to 11 hours, giving about 60,000 pictures in total. These special capsules are regularly updated as the technology keeps improving.

Recording pads, taped onto your belly, track the progress of the capsule. The images taken by the capsule are transmitted to a recorder worn around your waist.

What do I need to do to prepare?

You should fast (have no food or drinks) for 8 hours before a capsule endoscopy. If you have diabetes, you should not take your diabetes medication during the fasting period. If you take insulin, you should discuss this with your doctor.

Often, no bowel preparation is needed for capsule endoscopy, but your doctor may suggest you have only a fluid meal the night before the procedure. No special diet is required, but you should avoid strongly coloured foods and iron tablets for 24 hours before the procedure.



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What happens during the procedure?

On the day of the procedure, you will wear a harness holding the data recorder for 8 hours after swallowing the capsule. Gentle activity is a good idea while wearing the harness, as this will help the capsule move through your gut.

You should drink no fluids for 2 hours and eat no solid food for 4 hours after swallowing the capsule. Do not swallow chewing gum during the procedure.

You are allowed to have a glass of water when swallowing the capsule. A substance called 'simethicone' is often added to the water to prevent bubbles, which can interfere with the quality of the pictures taken by the capsule.

Remember

- No fluid for 2 hours after swallowing the capsule
- No solid food for 4 hours after swallowing the capsule

What happens after the procedure?

Eight hours after swallowing the capsule, you will return to the doctor's surgery to have the harness and recording pads removed. The information from the data recorder is sent to a computer, and the pictures are turned into a video to be examined by the doctor.

The capsule is single-use only and **does not need to be retrieved**. The capsule passes naturally in stool (poo) within 1 to 3 days. Most patients are not aware when it has passed. The capsule can be safely flushed down the toilet.

Are there any risks?

Capsule endoscopy is a very safe procedure, and complications are very rare.

The capsule has a gel coating, which makes it easy to swallow. Fewer than 1 in 100 patients has difficulty swallowing the capsule. Abdominal pain or vomiting after swallowing the capsule is extremely rare and should be reported immediately if it happens.

In about 1 in 100 patients, the capsule may get stuck in the bowel. This can happen if the bowel is narrowed or has some other abnormality. Usually, the capsule will eventually pass on its own. On rare occasions, it will need to be removed with a procedure such as an endoscopy or

surgery. If there is a blockage in the bowel, this can sometimes be fixed at the same time. If your doctor suspects you may have bowel narrowing, they may suggest doing an initial test with a dissolvable (patency) capsule.

About 1 in 10 patients will not have the capsule reach the large bowel on the day of the test. The doctor will be able to see this on the capsule video. If this happens, the doctor will arrange an x-ray to check that the capsule has passed out of the bowel.

Patients wearing the harness and data recorder are advised to stay away from large radio transmitters (e.g., TV transmission towers) and not to visit airports and major shopping centres, where the harness could trigger security screening equipment.

Who can I contact if I have any questions?

If you have any questions or need advice, please talk to your doctor.

Acknowledgements

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