

Patient information

Small bowel capsule endoscopy

(Outpatient– with full dose bowel preparation)

You have been referred by your doctor to have a small bowel capsule examination. This information is to explain the procedure and help you make an informed decision before consenting to the procedure. If you have any questions or concerns, please speak to a member of staff. If you are unable to attend your appointment, please inform us as soon as possible.

What is a small bowel capsule endoscopy?

A small bowel capsule endoscopy is a test that helps to examine the lining of your small intestine using a small wireless camera which when swallowed takes multiple pictures per second as it passes through your digestive tract.

What happens during a small bowel capsule endoscopy?

Excellent preparation is key to a successful capsule examination which is why you will be asked to be on a clear liquid diet 1 day prior to the test. Additionally, you will need to follow a laxative regime which will start the evening prior to your appointment.

You will be asked to swallow a small disposable capsule, roughly the size of a large vitamin pill (26mm x 11mm), with a drink of water. This will contain a solution to help dissolve bubbles that form in your digestive tract. The capsule contains one camera, a light source, small batteries and a wireless transmitter. Once you have swallowed the capsule, it captures images as it naturally travels through your gastrointestinal tract. The images are then transmitted to a sensor belt and then to a data recorder that you wear in a pouch and strapped on your shoulder. You will have to wear this equipment for most of the day.

After swallowing the capsule, you will be encouraged to go for a walk and come back to the endoscopy department after an hour so that we can check that the capsule has reached the small bowel. Should you have problems with walking, you will be allowed to stay in the endoscopy department's waiting area for an hour until we check the location of the capsule. After ensuring that the capsule has reached your small

bowel, you will then be allowed to go home. You will be encouraged to move about and remain active while the capsule is inside your body, to encourage the natural passage into your bowels. Once you have passed the capsule in your faeces, it can be flushed away and there is no need to recover it.

You will be required to return the equipment to the endoscopy department between 4:30pm to 5.00pm on the same day. The images will be downloaded from the data recorder and into the computer which then creates a video of your digestive tract. After that, the video will be reviewed by the nurse practitioner and will be verified by a consultant.

What are the risks or possible complications involved in capsule endoscopy?

- There is a small risk that the bowel preparation has not worked and the bowel is not clean enough to obtain clear images for accurate diagnosis. If this occurs, we may ask you to repeat the procedure.
- There is a small risk that the capsule would not pass naturally and get retained in your bowel. This rarely happens but is usually caused by a narrowing in the small or large intestine. If this is suspected, we would ask you to have a patency capsule test first. This procedure makes use of a “dummy” pill which needs to be swallowed to ensure that there is no narrowing in your bowel and that it is safe for you to undergo capsule endoscopy. If this procedure is necessary, we will give you further information.
- The average length of the procedure is approximately 3 – 7 hours however, it differs from person to person. If the movement of your bowel is slow, there may be a delay in the capsule passing through your small bowel within the maximum battery life of the capsule (approximately 11 hours). Should this occur, the procedure may be incomplete thus, you will be contacted to discuss regarding the necessary procedure that you need to undergo.
- There is a small risk that the equipment might not work properly.
- There is a very small risk of aspiration (capsule going down the wrong tract).
- There is a very rare chance of the capsule blocking the bowel or causing perforation (tear or hole in the intestinal lining). Should this occur, you may need to undergo an endoscopy or surgery to repair any damage or to retrieve the capsule.

What are the benefits for capsule endoscopy?

- Small bowel capsule endoscopy is a non-invasive procedure which provides detailed and good quality mucosal images of the small intestine. It is painless therefore does not require any pain relief medications or sedatives.
- The capsule can be easily swallowed.
- After swallowing the capsule, you will not be restricted to a bed and you are free to go about your normal daily routine for the rest of the day.
- You will not be exposed to radiation.

How should I prepare for a small bowel capsule endoscopy?

The key to a successful capsule endoscopy examination is excellent preparation. It is very important that your bowel is clear of any waste material, otherwise it would be possible to miss something or would render a need for a repeat procedure. This being said, you will need to strictly follow the instructions on what or what not to eat or drink prior the procedure.

- The following medications should not be taken during the week prior the procedure:
 - Iron supplements or iron containing vitamins. Iron discolours the bowel lining, making bowel preparation and image interpretation more difficult.
 - Buscopan / Mebeverine / Colofac
 - Imodium / Loperamide
 - Codeine
 - Morphine

These drugs affect the digestive tract, therefore if instructions are not carefully followed, it may affect the procedure and results. Please seek advice from your GP if needed or if you are worried about stopping any of these medications.

- **If you are a diabetic**, please contact your diabetic provider or GP regarding your medication or insulin intake the day prior and the day of your capsule endoscopy.
- Please let us know if you are pregnant or suspect you may be pregnant, as this procedure should not be performed during pregnancy.
- Please inform us if you have any pacemakers or implanted cardiac devices (ICD).
- **It is prohibited for you to undergo an MRI scan while the capsule is still inside your body.**

What type of food and beverage am I allowed to eat and drink prior the procedure?

Please commence a low residue diet 3 - 5 days prior the procedure. Please see chart below for suggestions:

Cereals	Rice Krispies, Frosties, Coco Pops, Special K, Cornflakes®
Eggs	Scrambled, boiled, poached
Spreads / sweets	Seedless jam, honey, syrup, Marmite, Vegemite®
	Toffee, marshmallows, white/brown sugar, plain ice cream, jelly, ice lollies
Fruits	Stoned, peeled, pipped: apple, ripe banana, peach, pear, melon, avocado, apricot, plum (1 serving per day)
Flour based	White flours and flour products (eg plain cakes, plain biscuits, plain scones, cornflour, pasta made from white flour)
	White bread (up to 4 slices/day)
	White rice (boiled/steamed)
Fish / poultry / meat	Steamed, boiled, casseroled or microwaved methods of cooking
Vegetables	Potato, pumpkin, squash (boil until soft, avoid skin and seeds) – small portions only
Beverages	Clear fruit or vegetable juices (except prune), tea, coffee
Milk / milk products	Yoghurt, milk Mild cheddar, cream cheese, plain cottage

The day before the procedure:

- **Do not eat any solid food after 10.00am.** After this time, you can increase your oral fluid intake as you can be maintained on clear liquid diet until instructed not to do so. This diet can include the following clear liquids:
 - Water
 - Apple juice
 - Tea and coffee without milk
 - Clear, non-carbonated sports drinks (any colour except red or purple)
 - Bubble gum and hard sweets
 - Popsicles or jelly (any colour except red or purple)
- **Not allowed:** Milk, cream, alcohol, soup / broth, fruit juices with pulp, solid foods

Evening before the procedure

- **5:00 pm** - Please drink the first dose of Moviprep. Mix sachet A with sachet B in 1 litre of water. You can put the mixture in the fridge if you wish; it may make it easier to drink.
- **8:00 pm** - Please drink the second dose of Moviprep. Mix sachet A with sachet B in 1 litre of water. You can put the mixture in the fridge if you wish; it may make it easier to drink.
- You should have received the bowel preparation medications via the post. You should expect frequent bowel movement or diarrhoea after taking this therefore, stay close to a toilet once you have taken the Moviprep.
- We encourage you to increase your oral fluid intake (clear liquids) after taking this bowel preparation.

The day of the procedure

- Please do not eat or drink anything 2 hours before the procedure.
- Any due medication **must** be taken at least two hours before your appointment time
- Please wear only one layer of thin clothing when you arrive for your appointment. This is to ensure that we obtain good quality recording of your procedure. It is advisable for you to wear a loose top.
- Please avoid smoking on the day of your procedure.

- Please arrive promptly in the hospital in your appointed time and bring your list of medications with you.
- During the admission process, the nurse will talk you through what is going to happen and instructions will be given about what you would be expected to do for the rest of the day.

After swallowing the capsule

- After two hours, you can take necessary medications with sips of water and you may drink clear liquids (examples given below):

Allowed	Not allowed
Water	Dairy products
Tea or coffee without milk, cream or sugar	Fruit juices with pulp, vegetable juice
Apple juice	Soup
Clear, non-carbonated sports drinks (any colour except red or purple)	Carbonated drinks

- 4 hours after swallowing the capsule, you can have a light snack.
- Once you have gone home with the equipment, please make sure that the sensor belt remains positioned over your abdomen and does not ride up towards the chest. To prevent this from happening, we recommend that you do a quick belt position check whenever changing your position between sitting and standing.
- Please avoid touching and manipulating the leads and connections of the equipment attached to you.
- Please do not attempt to activate the RealTime viewer on the recorder as such activity attempted at home can corrupt the recording.
- Be mindful to check the flashing capsule icon in the Data Recorder. Please remember that it should always be blinking blue. If it stops blinking or you notice any change in colour, note the time and contact the nurse practitioner right away.
- **Please DO NOT undergo an MRI scan until the capsule is excreted.**
- The equipment can be removed after you have passed the capsule in your faeces. There is no need to recover the capsule and it can be flushed away.

Is there anything that I should look out for after the procedure?

The procedure should not have any side effects but if you have any concerns or have developed any unusual symptoms, please contact the Endoscopy Nurse Practitioner.

Results

Your results will be sent via the post to you and the doctor who referred you for the procedure within a couple of weeks after the video of your test has been created and reviewed.

Contact us

You can contact the Endoscopy Nurse Practitioner from Monday to Friday 8:30am to 5.00pm at 01284713952 or 01284713247 for any queries or concerns.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (formerly DisabledGo)

<https://www.accessable.co.uk>



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