

Service: **Endoscopy**

# What is Capsule Endoscopy?



This involves swallowing a small capsule (the size of a large vitamin tablet), which will pass naturally through your digestive system, taking pictures of the intestine.

The images are transmitted to sensors attached to a data recorder held in a harness. The capsule is disposable and will be passed in your bowel movement.

## **Why does my doctor want me to have a Capsule Endoscopy?**

One reason is to diagnose obscure gut bleeding in adults. It is best to perform capsule endoscopy as soon as possible during/after the bleeding episode.

In addition, it is being used increasingly for the diagnosis of Crohn's disease. It has been used to detect small bowel damage associated with the use of anti-inflammatories and determining the cause of abdominal pain.

## **What are the risks involved?**

Very occasionally, if part of the intestine is narrowed, the capsule can become stuck in the intestine (less than one case in 100). Symptoms that may indicate an obstruction include abdominal pain, nausea and vomiting. Even if this occurs it rarely causes a blockage but in some cases it may need to be removed surgically. In about 80% of such cases, an operation for the narrow bowel is required anyway. Capsule endoscopy is not usually performed in patients who are pregnant. There is a risk that the investigation may be incomplete (in 10 to 25% of cases), and may lead to false positive or false negative results.

## **Should I continue to take my medication?**

Please continue to take your regular medication as usual. However, if you are prescribed iron tablets or non-steroidal anti-inflammatory drugs (such as ibuprofen, diclofenac or celecoxib) stop for one week prior to your appointment. Contact the department if you have any questions about this.

## **The day before your Capsule Endoscopy**

At 2pm on the day before your capsule appointment you must stop eating solid food and begin a clear liquid diet. You can drink until midnight. Clear liquids includes tea and coffee without milk, squash, alcoholic drinks, water, clear soup,bovriil and oxo. Clear jelly and boiled sweets are also allowed.

From midnight to 5am on the day of your appointment you can only drink water.

Abstain from smoking 24 hours prior to undergoing the procedure.

## **Day of the procedure**

Do not take any medication after 5am before undergoing the procedure.

Please dress in loose fitting, two piece clothing.

## **What happens when I come to the unit?**

You will be taken to a cubicle and adhesive sensor pads will be applied to your abdomen. These will be connected to a data recorder which you will wear in a belt around your waist.

You will then be instructed to swallow the capsule.

## **After swallowing the capsule**

Once you have swallowed the capsule, do not go anywhere near any source of powerful electromagnetic fields such as near an MRI or amateur radio for at least eight hours.

Do not eat or drink for at least two hours. After two hours, you may have clear fluids. After four hours you may eat normally.

Capsule endoscopy lasts approximately eight hours.

Do not disconnect the equipment or remove the belt at any time during this period.

Handle the equipment carefully. Avoid sudden movements and avoid banging the data recorder. Do not expose it to shock, vibration or direct sunlight as this may cause the loss of information.

During the capsule endoscopy you will need to verify every 30 minutes that the small light on top of the data recorder is blinking twice per second. If it stops blinking, record the time and contact the Endoscopy Department.

Avoid any strenuous activity, especially if this involves sweating and do not bend over or stoop during the eight-hour period.

### **After completing the Capsule Endoscopy**

You will be given a time to return to the Endoscopy Unit to return the equipment with your capsule endoscopy event form.

You may commence a normal diet once the test is completed. The capsule is normally passed in your stool 24 hours to 72 hours after ingesting it. It can be flushed down the drain safely.

### **Advice for patients with diabetes who require a Capsule Endoscopy**

This information is provided in addition to the instructions you have received. As a diabetic, you are at an increased risk of developing a low level of blood sugar when you do not eat for a prolonged period, called a 'hypo', which may produce sweating, shaking, and blurred vision. To avoid this occurring whilst you are taking your bowel preparation, please follow the instructions below.

Have additional sugary/glucose drinks at home such as Lucozade™. If you think you are having a 'hypo', have a glucose drink or take three glucose tablets immediately.

## Day before the procedure

Take your insulin/diabetic tablets with your breakfast and lunch as usual. Do not eat anything after 2pm until after your examination. For the rest of the day, you should take sugary drinks regularly, for example 100mls every two hours. If possible, check your blood sugar level and take less sugary drinks if it rises above 10 mmol/l and more if it falls below four mmol/l.

Once you are taking fluids only, reduce your injected insulin dose by half. If you take diabetic tablets, continue to take them as normal. Stop taking any fluids at midnight.

## Day of the procedure

Your appointment should be at the beginning of the morning list.

In the morning, **do not** take your insulin/diabetic tablets. If possible, check your blood sugar before you travel to the hospital. If it is very low (less than three mmol/l) or you think you are having a 'hypo' then drink a clear sugary drink.

Bring your insulin/diabetic tablets and if possible a sandwich with you, to have after the procedure.

For information about references used to produce this leaflet, please contact the Endoscopy department on 0117 414 5054.







## Patient details

**Name of procedure(s)** (include a brief explanation if the medical term is not clear)

### Wireless Capsule Endoscopy

This involves swallowing a small capsule (the size of a large vitamin tablet), which will pass naturally through your digestive system, taking pictures of the intestine.

## Statement of patient

**You have the right to change your mind at any time, including after you have signed this form.**

I have read and understood the information in the attached booklet including the benefits and any risks.

I agree to the procedure described in this booklet and on the form.

I understand that you cannot give me a guarantee that a particular person will perform the procedure. The person will, however, have appropriate experience.

Where a trainee performs this examination, this will be undertaken under supervision by a fully qualified practitioner.

Signed

Date

Name (print in capitals)

**If you would like to ask further questions please do not sign the form now. Bring it with you and you can sign it after you have talked to the healthcare professional.**

**Confirmation of consent (to be completed by a health professional when the patient is admitted for the procedure).**

I have confirmed that the patient/parent understands what the procedure involves including the benefits and any risks.

I have confirmed that the patient/parent has no further questions and wishes the procedure to go ahead.

Signed

Date

Name (print in capitals)

**Job title**



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**PATIENT  
APPROVED** 

How to contact us:



**0117 414 5054**



**[www.nbt.nhs.uk/endoscopy](http://www.nbt.nhs.uk/endoscopy)**

If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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