

CAPSULE ENDOSCOPY

Information

WHAT IS CAPSULE ENDOSCOPY?

Capsule endoscopy allows visual examination of the lining of your small intestine, which is not readily seen on routine endoscopy or colonoscopy.

Capsule endoscopy involves swallowing a video capsule, which is a small plastic tablet about the size of an almond (10-27 mm). Within this capsule, there is a camera, light source, battery and signal transmitter. Once swallowed, the capsule will travel through the gastrointestinal tract (as if it were a piece of food). The video capsule will record images for around 8 hours, which are transmitted to a recording device worn on a belt around your waist. Once the procedure is complete, the photographs are downloaded and viewed by your Gastroenterologist.

WHAT ARE THE REASONS FOR UNDERGOING A CAPSULE ENDOSCOPY?

Capsule endoscopy is primarily performed to diagnose conditions of the small bowel. A common indication is unexplained gastrointestinal bleeding or anaemia, when the source has not been found via endoscopy or colonoscopy.

Please note that capsule endoscopy is a diagnostic procedure and is limited by an inability to obtain biopsies or administer therapy. You may still require further treatment with a different procedure following the capsule endoscopy.

WHAT ARE THE RISKS OF HAVING A CAPSULE ENDOSCOPY?

Capsule endoscopy is generally a safe procedure and complications are rare.

Around 1 in 100 patients retain the capsule in the gastrointestinal tract. Capsule retention can result from narrowing of the bowel or scarring related to prior surgery.

In most cases, the capsule will eventually pass and rarely surgery or endoscopy is needed to remove it. If there is concern as to a retained video capsule (when the capsule is not seen to pass into the large bowel on review of images), an abdominal x-ray may be performed. Magnetic resonance imaging is to be avoided if there is a chance a video capsule is retained.

The capsule is gel coated and less than 1 in 100 patients have issues with swallowing it.

WHAT WILL I NEED TO DO BEFORE MY PROCEDURE?

You will need to fast with nothing to eat or drink for at least 8 hours prior to the capsule endoscopy. This is extremely important to obtain clear views of the lining of the small bowel using the video capsule.

Bowel preparation is not typically needed, but you will need to have a liquid diet (no solid food) from 2pm the day before the procedure. Please see our capsule endoscopy preparation instructions for further information.

Prior to undergoing a capsule endoscopy, your Gastroenterologist will review you to discuss the procedure in more detail and obtain informed consent. At the time of this appointment, it is important to inform

your doctor if you have previously had abdominal surgery or bowel obstruction, issues with swallowing, or if you have a pacemaker.

WHAT DO I DO WITH MY MEDICATIONS PRIOR TO CAPSULE ENDOSCOPY?

Any essential medications can be taken with a sip of water up to 2 hours before the examination. If you are on diabetic medications, please discuss management of these medications with your doctor for further advice. Iron tablets should be avoided for at least 5 days before the examination.

WHAT HAPPENS ON THE DAY OF THE PROCEDURE?

On the morning of your procedure, you will be asked to attend the clinic. A sensor array will be applied to your abdomen using adhesive pads, and a waist belt will be fitted containing the recording device. The capsule is then swallowed using a glass of water. Clear fluids may be consumed 2 hours after swallowing the capsule, and a light diet may be eaten 4 hours after swallowing the capsule.

The data recorder is worn for at least 8 hours after the capsule is swallowed. You are free to return home during the procedure, and get on with your usual daily activities. Strenuous exercise is to be avoided whilst undergoing the procedure. While wearing the recorder, you should also avoid large radio transmitters (due to interference) or airports (because the belt may trigger security screening equipment).

There should be no discomfort associated with a capsule endoscopy. The video capsule is small, and should not be troublesome to swallow or pass.

HOW LONG DOES A CAPSULE ENDOSCOPY TAKE?

A capsule endoscopy takes between 8-12 hours to perform. Capsule endoscopy is a day procedure, so you will not need to stay in hospital overnight. Capsule endoscopy does not require any sedation or anaesthetic drugs.

WHAT HAPPENS AFTER THE PROCEDURE?

At the end of the data-recording period, which is usually around 8 hours, you will return to the clinic and your sensor, pads and recording device will be retrieved. The images from the recording device are downloaded onto a computer and made into a video, which your specialist will review.

The capsule is disposable and will pass in your stool naturally within 1-3 days. Most patients will not notice the capsule passing. It does not need to be retrieved and can be flushed down the toilet. If you are concerned that the video capsule has not passed after 7 days you should contact your Gastroenterologist's rooms.

Results of the capsule endoscopy are usually available within 1 week of the procedure. Either an appointment will be made with your Gastroenterologist or the capsule endoscopy report will be made available to your referring doctor.

If you do develop any symptoms following your capsule endoscopy, including abdominal pain, fever, nausea, vomiting or have any concerns please seek medical advice immediately.

FURTHER INFORMATION ABOUT CAPSULE ENDOSCOPY?

Further information on capsule endoscopy can be found through the Gastroenterological Society of Australia website:

<http://www.gesa.org.au/resources/patients/health-information-fact-sheets/>