

Endoscopy department

Understanding capsule endoscopy

Information for patients, relatives and carers

Name:

Hospital number:

Your appointment is on:at:

at: Charing Cross / Hammersmith / St Mary's Hospital
and at 09.00 on the day after the test to remove recording equipment

Introduction

This leaflet is designed to help you prepare for your capsule endoscopy and answer any questions you may have.

Please read this at least one week before your appointment and follow the instructions carefully.

If you cannot make your appointment, please call us on **020 3312 6010** or email imperial.endoscopyappointments@nhs.net

For questions about preparing for this procedure, please contact the hospital where your procedure is booked and ask to speak to the nurse in charge:

- Charing Cross Hospital: **020 3311 1057**
- Hammersmith Hospital: **020 3313 2645**
- St Mary's Hospital: **020 3312 6681**

If you do not attend your appointment, we will refer you back to the healthcare professional who requested this investigation for you.

What is capsule endoscopy?

Capsule endoscopy is a procedure that allows your doctor to examine the lining of the middle part of your gastrointestinal tract. This includes the three portions of the small intestine – the duodenum, jejunum and ileum.

In this type of endoscopy, we use a pill-sized video capsule, which has a built-in light source and camera. Once the capsule has been swallowed, it passes through your stomach and intestine, taking pictures. The capsule then transmits the pictures to a data recorder worn on a belt around the waist for approximately 8 hours. At the end of this time, your doctor will be able to view these pictures on a video monitor. The capsule is passed naturally out of the body as normal waste.

Capsule endoscopy is also sometimes referred to as ‘small bowel endoscopy’, ‘capsule enteroscopy’ or ‘wireless endoscopy’.

Why is capsule endoscopy done?

Capsule endoscopy helps your doctor to check your small intestine for abnormalities. This part of the bowel cannot be reached by traditional upper endoscopy (where a long, thin, flexible telescope is passed into the body via the throat) or by colonoscopy (where the telescope is passed into the body via the rectum).

The most common reason for doing capsule endoscopy is to search for a cause of bleeding from the small intestine. It may also be used for detecting polyps (growths), inflammation such as Crohn’s Disease, ulcers and tumours of the small intestine.

Are there any alternatives to capsule endoscopy?

Other tests which can give some of the same information include conventional endoscopy (where the doctor uses special telescopes or tubes to look down into the voicebox or gullet), X-rays or CT scans. A special endoscopy known as ‘push enteroscopy’ can visualise part, but not all of the small bowel. Capsule endoscopy provides a more complete picture of the intestine. A special endoscopy known as ‘balloon enteroscopy’ can visualise more of the small intestine than push enteroscopy and may be suggested after the capsule endoscopy to further evaluate any findings.

Are there any risks associated with capsule endoscopy?

Although complications can occur, they are rare. There is an approximately 1% risk that the capsule may be impeded and not pass through the gastrointestinal tract. This is usually caused by a stricture (narrowing) of the intestine from inflammation, a previous operation or a tumour. This hardly ever causes immediate problems and the cause of the narrowing and retrieval of the capsule will need to be subsequently managed.

Is there anything I need to do to prepare for my appointment?

Please contact the endoscopy unit for advice before the procedure if you have any known problems with swallowing, or if you have diabetes:

- Charing Cross Hospital: **020 3311 1057**
- Hammersmith Hospital: **020 3313 2645**
- St Mary's Hospital: **020 3312 6681**

4 days before your capsule endoscopy:

- You should stop taking iron tablets and or constipating agents (for example, co-phenotrope, codeine phosphate, loperamide etc.).
- You should stop taking aspirin and all non-steroidal anti-inflammatory drugs (for example, Ibuprofen) 1 week prior to the procedure.
- You should continue taking all other medication and any laxatives until you have the capsule endoscopy.

The day before your capsule endoscopy:

You may eat a normal diet until lunchtime (no later than 1pm) the day before the procedure.

After lunch you are to commence a CLEAR liquid only diet, DO NOT eat any solid food until after the test.

Drink plenty of water throughout the day.

Suggested clear liquids:

- water
- black tea/coffee (with lemon or sugar)
- fruit squash
- clear soups
- soda, tonic water, lemonade, cola
- Lucozade
- Oxo
- Bovril
- Marmite

Do **NOT** drink milk.

What happens on the day of the test?

The procedure is very simple and you will be in the department for less than half an hour

A belt will be placed over your shoulders and around your waist to hold the data recorder and batteries. We will then give you the capsule to swallow with a glass of water. After this, you can go home. The capsule will wirelessly send information to the belt worn around your waist. You may wish to wear some loose clothing in order to cover and conceal the belt.

Please note: We will ask you to wear the belt for 8 hours. After this, you will be able to take it off and return the equipment.

Symptoms to watch out for at home?

If you experience any unusual bloating, pain and/ or vomiting, fever (high temperature) after the test, have trouble swallowing or have increasing chest pain, please contact the endoscopy department at the site where you had your procedure within working hours (09.00 – 17.00) and ask to speak to the nurse in charge:

- Charing Cross Hospital: **020 3311 1057**
- Hammersmith Hospital: **020 3313 2645**
- St Mary's Hospital: **020 3312 6681**

Outside working hours, please phone the hospital switchboard on **020 3313 1000** and ask to speak to the 'gastroenterology registrar on call' for further advice. Or call your GP or NHS 111.

You may notice that you pass the capsule in your stools in the days after the test. This does not need to be returned to the hospital, but can be flushed away.

Will I need to visit the hospital again?

Yes. We will ask you to return the belt and data recorder to the department the next working day. The images stored on the data recorder can then be viewed on a video monitor and examined for any abnormalities. Details of the results and any necessary treatment will be discussed with you by whoever referred you for the test (either your hospital doctor or GP) at your next appointment. If there is any doubt that the capsule has left the body then we may ask you to have an X-ray around 2 weeks after the test to ensure that the capsule has gone.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any suggestions or comments about your visit, please either speak to a member of staff or contact the patient advice and liaison service (PALS) on **020 3313 0088** (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or **020 3312 7777** (St Mary's and Western Eye hospitals). You can also email PALS at imperial.pals@nhs.net. The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:
Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street London W2
1NY

Email: ICHC-tr.Complaints@nhs.net

Telephone: **020 3312 1337 / 1349**

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team:
imperial.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

Endoscopy department
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