

Capsule endoscopy

Information for patients

This information leaflet answers some of the questions you may have about having a capsule enteroscopy. It explains the risks and the benefits of the test and what you can expect when you come to hospital. The advice varies depending on the time of your appointment and, if you have diabetes, how your diabetes is treated. If you have any more questions, please do not hesitate to contact a member of staff.

Endoscopy Unit

Denmark Hill Nurses' Station	020 3299 4079
Denmark Hill Reception	020 3299 3075
PRUH Nurses' Station	01689 864028
PRUH Reception	01689 864120 (male)
PRUH Reception	01689 864723 (female)

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your name and date of birth and check your ID band. If you do not have an ID band we will also ask you to confirm your address. If we do not ask these questions, then please ask us to check. Ensuring your safety is our primary concern.

What is a capsule enteroscopy?

It is a test we use to examine your small bowel. It involves swallowing a tiny video capsule camera (PillCam/MiroCam). The camera is just smaller than the tip of your little finger (up to the first skin crease), like a large vitamin tablet. It sends pictures wirelessly from the inside of your small bowel to a small recorder, about the size of a passport but 2cm thick, that you wear on a belt.

Why do I need this test?

Your GP (home doctor) or hospital specialist has recommended you have this test to find out more about the cause of your symptoms.

It is important that you understand why you are having it. If you are not clear about the reasons, please check with the endoscopist who sees you on the day of your test.

What are the benefits?

A capsule enteroscopy is an entirely non-invasive test which means we do not generally use any endoscopes, tubes or injections to complete it. We can get good images of parts of your small bowel very safely and easily. This helps us make a diagnosis and ensure you are on the best treatment.

A colonoscopic ultrasound is a safe procedure and serious complications are very rare. The risks are the same as for a routine colonoscopy.

What are the risks?

Capsule enteroscopy is an extremely safe procedure and most complications are very rare. But they can include:

- **The capsule gets stuck** – the capsule can get stuck inside you if you have a narrowing in your bowel. We consider the risk of this happening before you have the test, so it is very unlikely. If it does happen – and depending on what is causing the narrowing – you may need a keyhole (laparoscopic) operation to remove the capsule. If you have abdominal (tummy) pain which lasts more than 30 seconds, bloating or vomiting, please phone the relevant Endoscopy Unit Nurses' Station (see page one).
- **The capsule stays in your stomach** – sometimes the capsule does not leave your stomach and move into your small bowel. This does not mean that there is anything wrong. If this happens we can do the test again by pushing a new capsule past your stomach and into your small bowel with a short endoscope. Your hospital specialist will explain this procedure to you if you need it.

Are there any alternatives?

You can have a double balloon enteroscopy (DBE). This involves having an enteroscope – a long, thin, flexible tube with a camera on the tip – passed down into your digestive system through your mouth. You do not need a DBE as a first test for most conditions.

If we find any abnormalities during your capsule enteroscopy, your hospital specialist may recommend you have a DBE as well.

Consent

We must by law obtain your written consent to any procedures beforehand. Staff will explain all the risks, benefits and alternatives before they ask you to sign a consent form. If you are unsure about any aspect of the treatment proposed, please do not hesitate to ask to speak with a senior member of staff.

Do I need to prepare for the capsule enteroscopy?

We need to get a clear view of the inside of your small bowel, so it must be as clean as possible.

- Do not eat or drink for at least **six** hours before you come for your test. This usually means you only need to miss breakfast.
- You also need to prepare your bowel by taking a laxative beforehand. This procedure is the same as for a colonoscopy, so please read our advice sheet, *Preparing for your colonoscopy*, which explains how and when to use the laxative. All capsule enteroscopy tests start first thing in the morning, so you need to follow the preparation instructions for a **morning** colonoscopy appointment. If you have not received this leaflet, please follow the instructions which come with the laxative or ring the relevant Endoscopy Unit Reception for a leaflet.

Do I need to stop taking my medication?

If you take **iron tablets**, stop these at least one week before your test.

If you take **Imodium (loperamide), codeine or other drugs that make you constipated**, stop taking these two days before your test.

If you are diabetic please read our advice sheet, *Preparing for your OGD – information for patients with diabetes*, which also covers what you should do about your medication if you are having a G-POEM. If you have not received it, please ring Endoscopy Unit Reception on **020 3299 3075** and we will send you a copy.

If you are taking any other medications, you can continue taking most of these as usual, unless your doctor has advised you otherwise.

Things to remember

- Please bring your reading glasses as you will need to read and sign your consent form. You may also want to bring something to read while you wait.
- Please do not bring children with you unless there is someone to look after them. We do not have any childcare facilities in the unit.

Do I need to have a sedative?

No. Once you have swallowed the video capsule, you will be able to leave the Endoscopy Unit.

What happens when I arrive for my test?

We will ask you to come in for an early appointment so we can complete your test before 5pm on the same day.

When you arrive, a nurse will fill out an assessment form with you if you have not already done so and explain the procedure.

They will attach recording pads to the skin on the front of your stomach and the recorder to where on your belt. The recording pads tell the recorder how far the video capsule has travelled around your small bowel.

What happens if I cannot swallow the video capsule?

Most people can swallow the capsule because it is smooth and quite small. But if you find it difficult – or think you will find it difficult – please discuss this with the doctor who sent you for the test. You may be able to have the capsule pushed into your small bowel using a short endoscope (a thin flexible tube).

What happens during the test?

Once you have swallowed the video capsule you can leave the unit and have a normal day.

We will ask you to come back to the unit at 5pm on the same day (or eight hours after you have swallowed the capsule), so you can return the recorder.

How long does the test take?

The recorder picks up and stores images from the video capsule for about eight hours. Once you return the recorder, the test is over and you the video capsule will pass out of you naturally when you go to toilet.

What happens after the test?

By the time you come back to the unit on the day of your test, the capsule will have passed into your colon. When you go to toilet, it will pass out of your bowel in the normal way, although when this actually happens varies from person to person.

Who can I contact with queries and concerns?

If you have any questions, such as what to do about medication, before or after your procedure, contact the relevant Endoscopy Unit Nurses' Station, 9am – 5pm, Monday to Friday.

- Denmark Hill Nurses' Station, tel: **020 3299 4079**
- PRUH Nurses' Station, tel: **01689 864028**

If you want to change your appointment or need another information leaflet, contact the relevant Endoscopy Unit Reception, 9am – 5pm, Monday to Friday.

- Denmark Hill Reception, tel: **020 3299 3075**
- PRUH Reception, tel: **01689 864120** (male)
- PRUH Reception, tel: **01689 864723** (female)

At all other times, if you have concerns after your procedure, call your Nutrition Team (we will give you their contact numbers before you leave hospital), your GP (home doctor) or local Emergency Department (ED/A&E).

Sharing your information

We have teamed up with Guy's and St Thomas' Hospitals in a partnership known as King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas'. To make sure everyone you meet always has the most up-to-date information about your health, we may share information about you between hospitals.

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS:

Tel: **020 3299 3601**

Email: kch-tr.palsdh@nhs.net

You can also contact us by using our online form at www.kch.nhs.uk/contact/pals

PALS at Princess Royal University Hospital, Farnborough Common, Orpington

Kent BR6 8ND

Tel: **01689 863252**

Email: kch-tr.palspruh@nhs.net

If you would like the information in this leaflet in a different language or format, please contact PALS on 020 3299 1844.