

Patient Information Leaflet

THE
MEDICAL
SPECIALIST
GROUP
LLP

Your Guide to Capsule Endoscopy

THE MEDICAL SPECIALIST GROUP LLP
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www.msg.gg

Your doctor has referred you for a test called a Capsule Endoscopy, which allows us to examine your small bowel.

The capsule is smooth and the size of a large vitamin tablet; most people find this easy to swallow.



The capsule takes pictures as it moves through your small bowel - these are transmitted from the capsule to eight leads attached to your abdomen. The leads are attached to a recorder unit, which is secured to your waist. The leads and recorder are removed after approximately 12 hours and the recorded images are reviewed.

Capsule Endoscopy assists in diagnosing conditions in the small bowel, such as bleeding, anaemia, malabsorption, diarrhea and chronic abdominal pain—when other investigations, such as colonoscopy or x-ray, have not identified a cause for symptoms.



Preparation for the Capsule Endoscopy

We need to know if you have any of the following:

- Cardiac pacemaker or implanted electronic device
- Known intestinal obstruction, strictures or fistulae
- Difficulty swallowing
- Diabetes
- Pregnancy
- An MRI scan planned in the near future

If any of these apply to you please contact your Consultant as we may need to assess you in more detail prior to proceeding with the capsule endoscopy.

Can I still take my usual medication?

You may take most of your usual medications without a problem, however there are some which you should avoid in preparation for Capsule Endoscopy; these are identified in the table on the next page.

You may restart all of your medication the following day as usual. If you have any questions about this please speak to your Consultant.

When to stop medication for Capsule Endoscopy:	
14 days before	Anti-inflammatory painkillers (e.g. Ibuprofen, Diclofenac)
7 days before	Iron supplements (e.g. Ferrous Sulphate)
	Stool bulking agents (e.g. Fybogel)
The day before	ACE Inhibitors (e.g. Captopril, Cilazapril, Enalapril, Fosinopril, Imidapril, Lisinopril, Perindopril, Quinapril, Ramipril, Trandolapril)
	Diuretics (e.g. Bendrofluazide, Bendrofluethiazide, Bumetanide, Frusemide, Indipamide, Metolazone, Spironolactone)
	Angiotensin-II Receptor Antagonists (e.g. Candesartan, Eprosartan, Irbesartan, Losartan, Olmisartan, Telmisartan, Valsartan)
	Diabetic Medication (e.g. Metformin, Gliclazide)
On the day	Codeine or opiate painkillers (e.g. Morphine)

On the day before the procedure:

- You may have breakfast and a light lunch before midday, then no food after this. You can continue to drink clear fluids only.
- Clear fluids are liquids such as water, black tea or coffee and juice or squash that you can clearly see through, such as apple juice. This includes consommé (clear soup with no 'bits'), and green or yellow jelly. You should not have red or purple jelly, orange juice or barley squashes or soup.
- You will be given one sachet of Picolax (a preparation to clear your bowel). This must be taken at 6.00pm. Dissolve the contents of the sachet in cold water (150-200ml should be sufficient) and drink it when it has cooled down, followed by a litre of clear fluid over the next 2 hours.
- You should experience frequent bowel actions followed by diarrhoea 2-3 hours after taking Picolax.
- You may continue to drink clear fluids until midnight and then as much water as you like until your appointment.

On the day of the procedure:

- Do not eat or drink after midnight (other than water).
- Come to the **Medical Specialist Group** as directed in your appointment letter.
- Wear separate loose top and trousers/skirt so that the leads can be easily connected to the recorder unit.
- Do not use any moisturising creams, particularly on the chest or abdomen.
- We may have to shave body hair in areas where antenna leads need to be attached securely, such as the chest.
- You may be given a small tablet (Domperidone) to promote movement of the capsule through your digestive tract.
- We will then ask you to swallow the capsule with a small amount of water.



During the procedure

You will not need to remain at The Medical Specialist Group for the full duration of the procedure.

- 5 to 10 minutes after the capsule has been swallowed you are allowed to go home with instructions on how to disconnect the equipment.
- You can drink water only for two hours after the capsule has been swallowed, then any fluids after this two-hour period. You may eat after four hours.
- Once the battery life of the capsule equipment has finished (approximately 12 hours) it can be safely removed.
- Please arrange the return of the equipment via your Consultant's medical secretary
- Please inform us if you experience any skin irritation from the leads.

If you have any stomach pain, discomfort, nausea or vomiting please contact your Consultant, or a member of the nursing staff at The Medical Specialist Group; alternatively you can seek medical advice at the Accident & Emergency Unit at the Princess Elizabeth Hospital.

These are rare side effects of the procedure and may indicate that the capsule has not passed into the large bowel.

After the procedure

The capsule will usually pass naturally through the bowel. It is disposable and you should allow it to flush away down the toilet. It may pass unnoticed. If you have not seen the capsule pass within 2 weeks please contact your Consultant who will verify whether the capsule has passed safely into the large bowel (this is detailed in your video capsule report).

YOU MUST NOT HAVE AN MRI SCAN UNTIL YOU KNOW THAT THE CAPSULE HAS PASSED.

Confidentiality

The recorded images from your capsule endoscopy will be used to help us determine what treatment you may require. In addition, in the future we may wish to use the data collated for audit, education or research purposes. Data used will always be completely anonymised, however if you do not wish us to use your data in this way please let us know.

Modified by Dr H Duncan— April 2015

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