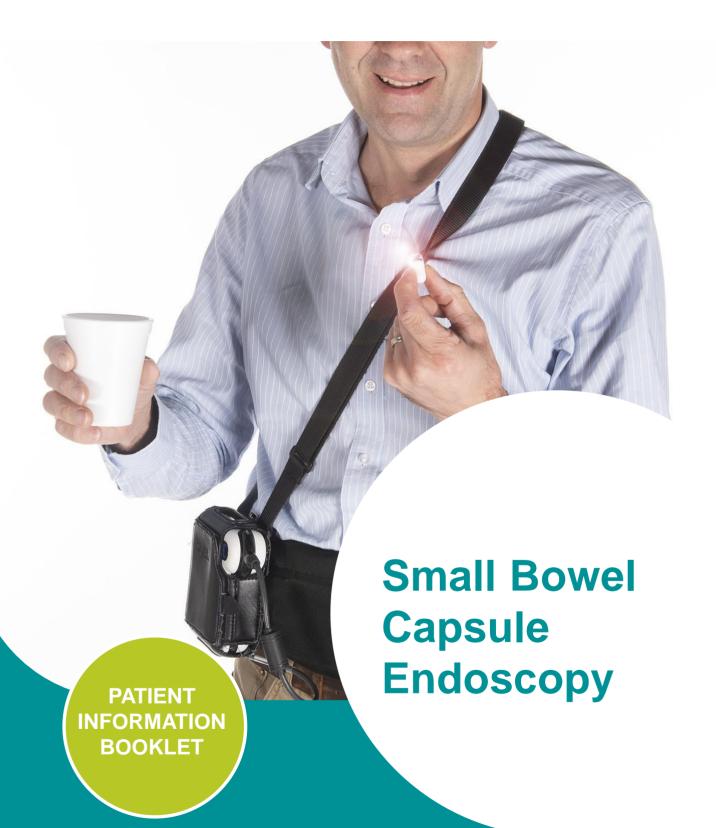


Tallaght University Hospital Ospidéal Ollscoile Thamhlachta

An Academic Partner of Trinity College Dublin



In this leaflet we explain the following to you:

- What is a small bowel capsule endoscopy.
- Why it is needed.
- What we need to know from you before the procedure.
- What you need to know before the procedure.
- Potential risks of the procedure.

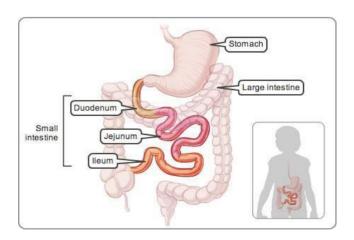
Small Bowel Capsule Endoscopy

An appointment has been made for you to attend the Gastrointestinal Investigations Unit at Tallaght University Hospital for a Small Bowel Capsule Endoscopy Test.

Please read and follow the instructions carefully. If you do not want to attend this appointment, please inform the Unit immediately so we can offer this time slot to another patient (phone: 01-4144181. E-mail: gifunctionlab@tuh.ie).

Why is Capsule Endoscopy Done?

Capsule endoscopy helps your doctor evaluate the small intestine. This part of the bowel cannot be easily reached by endoscopy. The most common reason for doing capsule endoscopy is to search for a cause of bleeding from the small intestine. It may also be useful for detecting polyps, inflammatory bowel disease (Crohn's disease), ulcers, and tumours of the small intestine.



What we need to know from YOU?

- Previous abdominal surgery.
- History of bowel obstruction.
- Swallowing problems.
- Diabetes.
- Internal electrical devices.
- Pregnancy.
- Scheduled MRI at the time of the procedure.

Capsule Endoscopy Summary

Capsule Endoscopy lets your Doctor examine the lining of the middle part of your gastrointestinal tract, which includes the three portions of the small intestine (duodenum, jejunum and ileum).

- On the morning of your procedure, a member of the GI Investigations Unit team will give you a capsule to swallow.
- The capsule is roughly the same size as a large vitamin tablet. Inside the capsule is a very small camera. It has its own light source and takes pictures of your small intestine as it passes through your system.
- These pictures are transmitted by a weak radio signal to a small recording device which you wear during the test.
- The recorder is attached to a sensor belt around your waist and is stored in a small bag, which you carry over your shoulder. You will need to keep the recorder and belt on for 10 hours.
- You can drink liquids two hours and have a light meal four hours after swallowing the capsule unless instructed otherwise. While normal activity is encouraged any strenuous activity, including jumping or running, should be avoided to prevent data recorder malfunction.
- Once the test is completed, you will need to return the recorder and belt in the pack provided to the hospital reception or security office in the main entrance of the hospital. The recorder and belt are stored safely and the video is downloaded and reviewed the next day.
- Unfortunately copies of individual videos cannot be provided.

How should I prepare for the procedure

It is important that the small bowel is empty of food for the test. Your last solid food should be taken at lunchtime the day before your appointment. You may continue to take clear fluids up to six hours before the test. However essential medication may be taken with a small sip of water up to two hours before the test. In some circumstances your doctor may request that you take a laxative the day before the test, to ensure the bowel is clean.

Before the test discuss any allergies to medications as well as medical conditions, such as swallowing disorders and diabetes with your doctor. Tell your doctor of the presence of a pacemaker or defibrillator, previous abdominal surgery, or previous history of bowel obstruction, inflammatory bowel disease, or adhesions.

In some cases where there is a definite possibility of a narrowing in your small bowel, your doctor may request you have a patency or 'dummy' dissolvable capsule done before going ahead with the real capsule test on a different day.

Certain medications can affect the capsule study:

- Non-steroidal anti-inflammatory drugs such as Difene, Brufen and Neurofen should be avoided for three weeks.
- 2. Iron supplements should be avoided for seven days.
- Aspirin should be stopped for seven days prior to your test. However, if you have had a recent stroke or had stents placed in your heart this medication should be continued.

Pregnancy

Please inform staff if you think you may be pregnant. Capsule endoscopy should be deferred unless essential until after your delivery.

A member of the GI Investigations Unit would be happy to talk to you about preparing for the test before your appointment.

What are the risks

Capsule endoscopy is a safe procedure.

- The major risk associated with the test is that the capsule may get stuck at a blockage. This is more likely if you had recent surgery, have a history of blockages or have known stricturing Crohn's disease. If you are at risk the team may perform a patency test before the capsule. If the capsule does get trapped it can usually be managed medically but could require an endoscopy, and rarely an operation to remove it.
- There is a risk of mild skin irritation from the sensor belt.

What can I expect on the day of the test?

- Upon arrival at the Hospital, please go directly to the Day Ward Reception, located on Level 2.
- ➤ Take a ticket from the dispenser for the registration desk. The registration desk opens from 7.00 a.m. to 2.30 p.m.
- To assist with registration please bring evidence of current entitlement to Health Services including medical card or any private Health Insurance Scheme including cover type and subscriber number.
- This procedure is categorised as a Day Case Procedure and for Non-Medical Card patients the Government Levy is applicable.
- Other Hospital charges may be incurred for some categories of patients.
- Once registered, you will be asked to wait in the reception area until a member of the GI Investigations Unit calls you for your procedure.
- The Unit is located adjacent to the waiting area.

What happens after Capsule Endoscopy?

The recordings will be analysed and reported by one of our Gastroenterologists and the results will be forwarded to your medical team. This may take up to one week depending on where your results have to be sent.

Any further queries please contact: 01-4144181 <u>or</u> 01-414 3378 <u>or</u> 01-414 3851 <u>or</u>

e-mail: gifunctionlab@tuh.ie

Incomplete Tests

Capsule endoscopy relies on your own gut to move the capsule along. Occasionally the capsule does not pass through the entire length of your system before the battery runs out and the recording stops. This is more likely if you are inactive during the test or smoke and can be more common in patients with diabetes. In this case your test is incomplete and it may need to be repeated, sometimes with the addition of a tablet to increase gut movement or with the capsule placed in your small bowel by endoscopy. Your own doctor will discuss these options with you in the event of an incomplete study.

When the capsule does not pass fully through your small bowel, a member of our team will contact you to check that you have seen it pass. If not, they will arrange for an x-ray in the coming days to check.

Final Checklist

- Check the date and time of your appointment.
- Make sure that you have read this leaflet and understand the indications and the risks of this procedure.
- ✓ Contact a member of our team if you have any of the medical conditions listed in this leaflet.
- ✓ Ensure that you follow the dietary instructions and stop medication that can affect the capsule study.
- ✓ Bring all the necessary information needed to register to register for this procedure.
- ✓ Make the necessary travel arrangements for the day of the procedure and to return the recorder and the belt the next day.