



PREPARATION FOR CAPSULE ENDOSCOPY (PATIENTS OVER 75 YEARS OF AGE)

Capsule endoscopy is a new technology designed to examine the small intestine. The test involves swallowing a capsule (about the size a large vitamin capsule) that takes multiple digital images of the small intestine. The images are transmitted to small sensors that are attached to the abdominal wall (like adhesive stickers). The small intestine is about 6 meters long and the capsule takes about 8 hours to travel through it. You should pass the capsule in your stools within two weeks of the test. The capsule does not need to be retrieved.

Please notify your specialist if you are diabetic, have had weight loss surgery on your stomach, or have a pacemaker.

Please cease the following drugs seven days prior to the capsule endoscopy if you are using them: iron supplements

Obtain from a chemist: 1 sachet of GLYCOPREP Orange (70g) (formally Glycoprep-C), a prescription is not required

The Day Before	Breakfast & Lunch	 Have light breakfast and light lunch choosing only foods from the 'white diet' including: Milk, white yoghurt (no added fruit), mayonnaise, cream, butter or margarine White bread/toast, rice bubbles cereal, eggs White rice, regular pasta, potatoes (peeled), rice noodles Rice crackers (plain), white flour, sugar Chicken breast (no skin), white fish fillet (no skin) Cheese: cream cheese/cheddar/ricotta/feta/cottage/mozzarella/parmesan White chocolate, vanilla ice cream, lemonade icy-pole, custard After lunch have only approved clear fluids for rest of the day. Water, clear fruit juice (apple, pear, grape), lemon jelly, black tea, black coffee, Lucozade, carbonated drinks, barley sugar, clear broth, lemon fruit cordial, No red or purple colours
	At 7pm*	Mix the sachet of Glycprep Orange in a litre of water (1000ml) and stir until dissolved. Drink 500ml slowly over 30 minutes, followed by a glass of water or approved clear liquid. Have at least 1 glass of water per hour until 10.00pm. The bowel preparation may induce loose stools. The remaining 500ml of Gycoprep can be disposed.
		IMPORTANT: You will need to fast from midnight. Have nothing to eat or drink after midnight. You may have your normal morning medications with a small sip of water at 6.30am
Procedure Day		 REMAIN FASTING. Attend the site booked for your procedure at the appointed time. The procedure takes up to 14 hours but you will be able to go home after swallowing the capsule, wearing the sensor belt around your waist. You will be allowed to drink liquids two hours after swallowing the capsule and then consume food two hours after that. General physical activity during the day such as walking will assist the capsule passage. Remove the recording belt at 10.30pm (evening) and return to the day hospital/ office the next morning (Monday if a Friday test). The capsule is disposable. It does not need to be retrieved.
		***You will be made aware of a flashing blue light on the data recorder worn on the sensor belt. This indicates the study is active and working. If the light stops flashing during the afternoon or early evening, then the study has most likely been completed. Please keep the sensor belt on until 10.30pm.

CAPSULE ENDOSCOPY – PATIENT INFORMATION

What is capsule endoscopy?

Capsule endoscopy is a new technology designed to examine the small intestine. The test involves swallowing a capsule (about the size a large vitamin capsule) that takes multiple digital images of the small intestine. The images are transmitted to small sensors that are attached to the abdominal wall (like adhesive stickers). The small intestine is about 6 meters long and the capsule takes about 8 hours to travel through it. You should pass the capsule in your stools within two weeks of the test. The capsule does not need to be retrieved.

Capsule endoscopy is a day procedure. You will be required to attend the hospital in the morning for about 60 minutes a special belt will be attached and you will be given the capsule to swallow. No sedation or anaesthetic is required. You will be required to observe some dietary restriction the day prior and take some bowel preparation which assists in improving image clarity.

After your return to the hospital the digital images are downloaded to a computer and are available for examination by the doctor from the following day.

Are there any risks to the patient?

There is a small risk that the capsule could become stuck in the small bowel. This is uncommon. Estimated risk is 1 in 200. A previously normal small bowel barium test most likely indicates a reduced risk of this complication. Surgery may be required to remove a retained (stuck) capsule. An x-ray may be requested one to two weeks after the test if the capsule is not seen on the video images to enter the large bowel. Capsules should be flushed away. On rare occasions technical problems or capsule retention in the stomach may mean a repeat procedure needs to be performed.

Please notify the office 9650 7917 before the test if you have a pacemaker or had weight loss surgery on your stomach

Cost.

There may be an out-of-pocket cost for this test. You will be informed of this prior to the test.

Are there any alternatives to capsule endoscopy?

Alternatives to capsule endoscopy include MRI small bowel and small bowel enteroscopy. You may discuss with your referring doctor the role of these investigations in specific circumstances.

Results

Dr Miller will contact you or your referring doctor within seven days of the test. Please contact the office on 9650-7917 if contact is not made.

Contact information:

Focus Gastroenterology 03 9650 7917 www.focusgastro.com.au

