

Small Bowel Capsule Endoscopy

Information for patients

Note for staff: Please tick or highlight the appropriate bowel preparation as per triage (page 2).

What is capsule endoscopy?

Capsule Endoscopy uses a small video capsule that takes pictures as it passes naturally through your gut. The pictures are sent to a recorder that you will carry around with you during the day and which stores images of your gut (small bowel). We can examine the images taken of your small bowel once you return the recorder.

Things to be aware of:

- Please let us know if:
 - You have regularly, over a long time (ie. more than 6 months) taken non-steroidal anti-inflammatory medications e.g. Ibuprofen, Indomethacin, Naproxen, Diclofenac
 - You have ever had any radiotherapy to the pelvic area
 - You have ever had any small bowel surgery.
- If you are on iron supplements, please do not take them for 7 days before the test
- Fibre (roughage) supplements (e.g. Fybogel) must be stopped 3 days before the test
- Anti-diarrhoea medications must be stopped 3 days before the test
- All other medications including steroids should be continued. On the morning of your test, please do not take your medications yet. You will be able to take your regular medications 4 hours after the test has started
- If you are taking insulin for diabetes, please inform your GP and/or the Gastroenterology (GI) laboratory, as special arrangements can be made for you if necessary. (Contact details are on page 4 of this leaflet)
- Please inform us if there is any possibility you may be pregnant.

What to expect:

1. Before coming for the test

For a successful test, it is important to follow the enclosed low residue diet and bowel preparation instructions.

Bowel preparation: Please follow the ticked instructions.

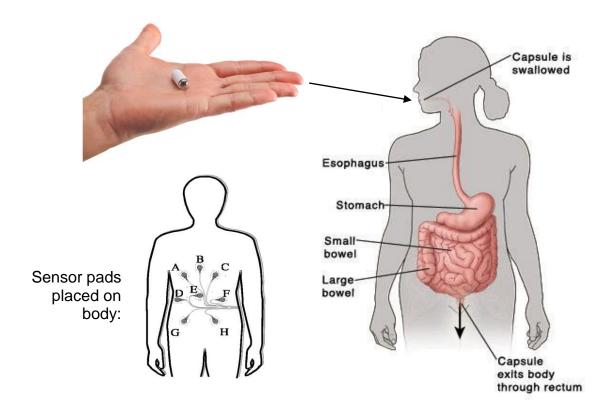
☐ PICOLAX®	☐ Clear fluids only
2 days before the test:	2 days before the test:
Please follow the instructions on the low residue diet sheet (Page 5).	Please follow the instructions on the low residue diet sheet (Page 5).
You should take the PICOLAX® the day before the test.	1 day (24 hours) before the test:
How to make up 1 dose of PICOLAX®:	Please consume only clear liquids* and water.
Fill a glass with 150ml cold water	water.
Empty the contents of 1 sachet of PICOLAX® into the glass	Do not drink after 6am on the day of the test.
 Stir for 2-3 minutes. If the milky solution becomes warm, allow time for it to cool before drinking. 	
PICOLAX® dose timing:	
Take your first dose at 8am on the day before your appointment	
 Take your second dose at 3pm on the day before your appointment. 	
Eating and drinking:	
 Please do not eat once you have started taking the PICOLAX® 	
 You may continue to drink clear liquids* 	
 Drink approximately 250 ml of water or other clear liquid every hour until your bowels have completely emptied. 	
Do not drink after 6am on the day of the test.	

^{*}Clear liquids mean fruit juices without pulp (but not red or purple juices), clear soups, jellies (not red coloured) and any clear fizzy or still juices.

Do not take black tea, coffee or milk.

2. Day of the test

- You will come into the unit on the morning of your test. Please wear loose-fitting, two piece clothing
- We will stick a number of sensors onto your stomach and chest with sticky pads
- The sensors are connected to a recording device which you will need to carry around throughout the test in a zip pouch
- We will give you the capsule to swallow with some special medication which prevents air bubbles (Infacol)
- Once the capsule is swallowed, you can have clear fluids for the next 4 hours to give the capsule time to leave your stomach
- 4 hours after you swallow the capsule, you can eat and drink as normal
- The recording equipment can record for up to 12 hours.



3. After swallowing the capsule

We recommend that patients go home, wherever possible, once they have swallowed the capsule and continue with their day as normal. You should take the recording equipment off 12 hours after you swallowed the capsule and return it to the Day Case/ Endoscopy Reception the following day. You may ask someone else to return the equipment on your behalf.

If you require monitoring (if we feel you do, we will discuss this with you) or if you have difficulty arranging transport, you can choose to stay in the unit for the rest of the day (the unit is open from 8.30am-5pm). We will check on you throughout the day to monitor the progress of the capsule through your bowel. Once the capsule has passed through your small bowel, you can go home. However if this does not happen before the unit closes or your transport arrives, you may still have to go home with the recording equipment and return it another day.

• If you require ambulance transport please telephone **0300 123 1236** to arrange. Please be aware that normal patient transport working hours do not always allow for a complete 8 hour test so alternative transport options should be used wherever possible. Please telephone the department to discuss further if necessary.

The capsule should pass harmlessly through the gut approximately 24 hours later and should be flushed away. You may not see the capsule pass.

The data from the recorder will be analysed and reports sent to your referring doctor.

Are there any possible complications?

The major risk of this test is that the capsule gets stuck inside the small bowel. In most people having this test, the risk is about 1.5%. As a safety measure, if there are any doubts that you have passed the capsule, we may ask you to have an abdominal X-ray 1-2 weeks after the test to check that it has been passed. Often this is just because the capsule has taken longer than usual to pass through the whole gut. A very small group of patients may require further procedures to remove the capsule.

Things which can put you at higher risk of the capsule getting stuck are:

- Long-term use of non-steroidal anti-inflammatory medications (as mentioned on page 1)
- Known or suspected inflammatory bowel disease, including ulcerative colitis and Crohn's disease
- Previous surgery to the small bowel
- Previous radiotherapy to the pelvic area.

If any of these apply to you, please let us know on the day of the test.

Contact details:

Appointment Coordinator: 0131 242 1605

Clinical Physiologist: 0131 242 1606

If you cannot attend, please contact the Appointment Coordinator to reschedule as we have a long waiting list. We will do our best to reschedule your appointment to suit you. Please contact the clinical physiologist if you have questions about the test itself.

Low Residue Diet sheet

The success of your hospital procedure depends on your bowel being as clear as possible.

The procedure may need to be repeated if you do not achieve a clear bowel.

This diet should be followed **the day before** you start taking your PICOLAX® or commence your clear fluid regime. **No solid food should be taken after the PICOLAX® preparation/clear fluid regime has been commenced**.

Information for patients who have been given PICOLAX®

You should expect frequent, loose bowel motions to start at any time after taking a dose of PICOLAX[®]. Please ensure that you have access to a toilet at all times following each dose, until the effects wear off.

To replace fluid lost from your body, it is important you drink plenty of clear fluids, preferably water, herbal and fruit teas, energy drinks, soda water and squashes throughout your treatment with PICOLAX®, until bowel movements have ceased. In general, you should try to drink about a large glass of water (approximately 250ml) or other clear fluid every hour whilst the effects of PICOLAX® persist.

What can you eat and drink on a low residue diet?

For the best results, before your bowel procedure, only low residue foods (low fibre) are recommended as directed by your doctor. These foods are less likely to remain in your bowel.

Fats (use sparingly): Butter, margarine Boiled, poached

Cereal: Crisped rice cereal, corn flakes (no bran)

Cheese: Cream cheese, cottage cheese, cheese sauce

Tofu

Potatoes (no skin): Boiled, creamed, mashed, baked
Pasta: Plain macaroni, spaghetti, noodles

Rice: Plain, boiled white rice

Meat/Fish: Minced or well-cooked tender, lean, meat, poultry and fish

Gravy: Using stock cubes (white flour or corn flour may be used to thicken)

Bread: White bread/toast (seedless)

Sugar/sweetener: White sugar, brown sugar, sweetener

Drinks: Water, energy drinks, soda water, non-staining herbal/fruit tea, clear

soup or drinks made from stock/meat extract cubes

Foods to avoid

- High fibre and highly coloured foods that can cause staining (e.g. red jelly, beetroot, coffee, tea and red fruit juices) are not recommended
- Cloudy fruit juices and milk/dairy products are not permitted
- Nuts, seeds and pips.