

Having a capsule endoscopy to examine your small and/or large bowel

Endoscopy Department
Information for Patients

Last reviewed: July 2026
Next review: July 2027
Leaflet number: 951 Version: 5

What is a capsule endoscopy?

A capsule endoscopy lets us examine your small and/or large bowel (colon). Your small/large bowel is also known as the small/large intestine or digestive tract. We may need to look at both your small and large bowel, or just your large bowel (colon). It is used to help find the cause of your symptoms and look for any problems.

You will need to swallow a capsule for the endoscopy. This capsule is a tiny camera. The cameras take 4 images per second. These images are saved in a data recorder which is connected to a belt we give you. We use these images to look at your small/large bowel.

It is also known as a 'colon capsule endoscopy' when we just need to examine the colon and is an alternative to having a colonoscopy (a flexible camera passed through the colon).

What happens in a capsule endoscopy?

- You will need to have a low fibre diet for 3 days. We will then ask you to swallow a capsule. We will also usually give you 1 tablet of domperidone. This is to help move the capsule through your gut. You will need to follow a laxative regime which starts the evening before your appointment swallowing the capsule.
- The capsule is the size of a large vitamin pill. The capsule will pass naturally through your digestive tract. To get clear images it is important that you carefully follow the instructions we give you, before and after swallowing the capsule.
- You will also need to wear a belt and a recording device for a whole day. This belt has devices that save the images from the capsule. The images are sent to a pocket-sized data recorder which you will carry around in a cross body bag.
- **You will then follow the rest of the instructions we give you at home. If you need to stay in hospital throughout the test, please let us know so arrangements can be made.**

- At home you will need to follow the instructions we give you timely. This is to make sure the capsule is passing through your bowel as needed. We will give you some more laxatives to take at home with clear instructions on when to take the laxative regime, guided by alerts from the equipment. The laxatives will keep your bowel clear making it easier to get clearer images for an accurate diagnosis.
- **You will not be able to eat most of the day.**
- You can remove the equipment after the capsule has been passed out of your body. There is no need to continue with the rest of the laxatives once the capsule has come out.
- We will ask you to return to the Endoscopy Department at 5pm on the same day and take the equipment from you. The images are then downloaded from the data recorder to a computer which creates a video of your small and/or large bowel (colon). The video is then seen by the doctor/clinical Endoscopist.

Can there be complications or risks?

- There is a small chance that you may need to do the test again if the bowel is not clean enough to see everything. Or if the camera moves through the digestive tract too quickly or too slowly. If this happens, we will contact you to book the test again.
- There is a small chance that the capsule may not pass through the small bowel. This happens to 1 in 200 people. This usually happens if there is a narrowing in the small bowel which is the cause of the problem being investigated. This does not mean that the answer has been found. If there are concerns that you may have a narrowed bowel, we would do a patency capsule test first. This is where you would swallow a dummy pill which melt/dissolve itself after 30 hours. This helps us to see there is no narrowing in your small bowel and that it is safe to swallow the capsule with camera. If you need a patency capsule, we will give you more information.
- There is a small chance that the electrical equipment might not work properly.
- There is a small risk of the capsule going down the wrong way (aspiration). We give you some water to swallow the capsule, so the chance of this is very low.
- Rarely, it can block the bowel completely (obstruction). Or cause a tear or hole in the bowel lining (perforation). If this happens, there is a risk of bleeding and a slight risk of infection. We would need to perform an endoscopy or surgery to repair any damage, or to remove the capsule.

What are the advantages?

- The capsule is easily swallowed.
- It is a painless procedure. You do not need any pain relief or sedation.
- You are free to move around throughout the day. Try to be as active as you are able to be.
- You can go about your day as normal once you have swallowed the capsule. You just need to make sure you return the equipment later the same day.
- You will not have any contact with radiation that comes with having some scans.

What do I need to do before the test?

- Stop taking iron tablets (or vitamins containing iron) 1 week before the procedure.
- Avoid non-steroidal anti-inflammatory drugs if possible for a month before the test (aspirin, ibuprofen, diclofenac, naproxen). **Please contact the Endoscopy Department before stopping aspirin.**
- If you take anti-coagulants (warfarin, aspirin, apixaban, dabigatran, rivaroxaban), diabetes medication, or antibiotics as a preventative treatment for heart disease, please contact your doctor first.
- If you are diabetic, please read the guidance on pages 6 to 8 to help manage your diabetes for this test. Certain insulin may need to be swapped so you will need to find this out ahead of time.
- **Please tell us if you are, or may be, pregnant. This test should not be performed during pregnancy.**
- **Please tell us if you have a cardiac pacemaker or internal electromedical device.**
- **You cannot have MRI scans until the capsule has passed from your body.**
- We will give you the laxative Gastrografin in the laxative regime. Gastrografin is also used as a dye (contrast medium) which helps to show areas of the body on an X-ray. **Please let us know if you have ever had an allergic reaction to Gastrografin or any other contrast medium. This so we can replace it if needed.**
- **If you have difficulty to swallowing please contact the Endoscopy Department.**

Start a low fibre diet at least 3 days before your test

Some ideas for foods you can include in a low fibre diet:

- White bread, rolls, toast, pitta bread, crumpets, wraps, naan and chapattis
- White boiled rice
- Dried or fresh white pasta
- Dried or fresh white noodles
- Yam
- Potatoes without skin
- Lean meat or poultry
- Fresh, frozen or tinned fish
- Eggs
- Cheese, cream cheese or milk
- Rice pudding, yoghurt and custard
- Crisps: Wotsits, Skips and Quavers
- Cornflakes, Rice Crispies
- Dishes made with maize, millet or cornmeal

Do not eat these high fibre foods at least 3 days before your test:

✗	Wholemeal bread including granary and seeded bread, rolls, toast, pitta bread, crumpets and tortilla wraps.
✗	Foods made from wholemeal, granary or seeded flours.
✗	Brown rice or pasta.
✗	Potato and pasta that has been cooked and then eaten cold like potato, pasta or rice salad.
✗	All fruits and vegetables.
✗	All nuts, pulses, beans and lentils.

The day before the test:

- **Do not eat any food all day.**
- You can have a clear liquid diet. You can drink:
 - water
 - apple, white grape and cranberry juices
 - tea or black coffee (with no milk or cream)
 - clear, non-carbonated sports drinks
 - popsicles or jelly (any colour but not red or purple)
 - bubblegum and hard sweets (lemon or mint flavour)
- **Do not drink:** fruit juices with bits or pulp in, milk, cream, soup or broth, alcohol or any solid food.
- **Diabetic patients see instructions on pages 6 to 8.**

Evening before the test:

- You should have received bowel prep in post. Please drink the first laxative. Mix it in 500ml of water. Drink this between 7pm and 9pm. Drink this as 200 to 250ml cup every 10 to 15 minutes if possible. Drink until completely finished.
- Then drink an extra 500ml of clear liquid. Do not eat anything after this.

Day of the test

- Between 5am to 6am drink the second dose of bowel prep. This is sachet A and B mixed together in 500ml of water. Drink this as 200 to 250ml cup every 10 to 15 minutes if possible. Drink until completely finished.
- Then drink an extra 500ml of clear liquid which you should finish by 8am.
- **Do not drink anything else. You cannot eat anything** until the capsule has passed out of your body.
- Dress comfortably to the appointment in 2-piece clothing. For example a shirt and trousers/skirt.

- Please arrive at the Endoscopy Department at the appointment time on your letter. On admission, you will be guided through the rest of the procedure with the support of a nurse.
- We try to keep waiting times as small as possible. Depending on how busy we are, please expect to be with us for 1 to 2 hours. This may be longer during busy periods. We also do emergency procedures which can take priority over our outpatient appointments.
- **Diabetic patients see instructions on pages 6 to 8.**

After swallowing the capsule:

- The nurse will give you clear instructions with what you need to do for the rest of the day. This will be instructions for the laxative regime to take while at home.
- If you get abdominal pain, nausea (not because of the bowel prep) or vomiting and fever, please contact the Endoscopy Department on **0116 258 6997** for advice.
- You can remove the equipment after the capsule has passed out of your body. You do not need to take any laxatives when the capsule has come out.
- You will need to return to the Endoscopy Department at 5.30pm on the same day with the equipment.
- If the capsule has not passed out of your body, please call the department for advice as you may still be asked to come back into hospital the same day.
- If you are staying in hospital after swallowing the capsule, the nurse will guide you through the procedure throughout the day. **Please note this must be agreed with the hospital before attending your appointment.**

Is there anything I should look out for after the test?

You should have no after effects from the test. But if you have any problems or do not feel well please contact the Endoscopy Department on **0116 258 6997**.

Commonly asked questions

- **If my symptoms have stopped before the capsule test, should I still come for the test?**
Yes. It is important that you still come for the test. Your doctor has requested this to check your small and/or large bowel (colon).
- **Will it hurt?**
No. This examination is not usually painful.
- **Can I drive home after the test?**
Yes. There are no after effects from the test.

Instructions for diabetic patients

If you are on insulin please follow the instructions on page 7. If you take more than 1 type of insulin please follow the instruction for each.

The table on page 8 will tell you what to do with your diabetes tablets and injections. If you take more than 1 please follow the instruction for both of them.

The day before the test:

- Please check your blood glucose level every 2 hours throughout the day.
- You can drink any clear liquids with sugar in them on the day before the test. This can be Lucozade, Coke, Squash and black tea or coffee with sugar.
- If your blood sugar falls below 5mmol/L, have a sugary drink and check again after 30 minutes. This may happen due to the length of your fasting period for this test.
- If your blood glucose level drops under 4mmol/L at any stage during the day, drink black tea or black coffee with sugar or 100ml of Lucozade. Then check your blood glucose level again. This is to stop you having a hypo (when blood glucose level falls under 4mmol/L) because of the lack of food during fasting.
- Before bed time we would like your blood sugar to be higher than 8mmol/L to make sure it does not drop during the night to an unsafe level (hypo).
- If your glucose level fails to come up, or if you start to run too high or too low during this process, please contact your usual diabetes care provider or the diabetes nurse helpline on **0116 258 4919** (email: uhl-tr.periodiabetesnurse@nhs.net) for support. For out of hours please **call 111** for advice. Please contact your usual diabetes care provider for any more support.

The day of the test:

- Please check your blood glucose levels every 2 hours.
- If your glucose levels fall below 4mmol/L you can take 100ml of Lucozade or black tea/ coffee with sugar.
- Please let the staff know on arrival of your diabetes and if you are having a hypo (blood glucose level under 4mmol/L). The nursing staff will come and see you.
- We ask that you stay with us for the day if your blood glucose levels are not stable. We can then manage your diabetes throughout the day with some IV medication.
- If your levels are stable and there is no concern, we will give you instructions on how to manage this at home. This is if you wish to go home.

Name of insulin	Instruction
Mixed insulins: Novomix 30 Humulin M3 Humalog Mix 25 Humalog Mix 50 Insuman Comb 25 Insuman Comb 50	Please contact the diabetes helpline on 0116 258 4919 (Monday to Friday, 9am to 3.30pm) a few weeks before your test as you will need insulin swapped for the week of the planned test.
Rapid insulins: Humulin S Novorapid Fiasp Humalog Apidra	Do not take these on the day before your test appointment because you will not be eating as normal. If you have any concerns about this please contact the diabetes nurse helpline or your usual diabetes care provider.
Basal insulins: Lantus Levemir Insulatard Humulin I Insuman Basal Abasaglar Toujeo Tresiba Semglee	Reduce the dose of these insulins by 20% for the day before the test and day of the test. For example, if you would usually take 10 units you will only take 8 units.

Name of tablet	Instruction
Acarbose	Do not take the day before test or on day of test.
Metformin (Sukkarto)	Do not take the day before test or on day of test.
Pioglitazone	Do not take the day before test or on day of test.
Dapagliflozin Canagliflozin Empagliflozin	Do not take the day before test or on day of test.
Repaglinide Nateglinide Semaglutide	Do not take the day before test or on day of test.
Gliclazide Glibenclamide, Glipizide Gliepiride Gliquidone	Do not take the day before test or on day of test.
Sitagliptin, Saxagliptin, Vildagliptin, Alogliptin, Linagliptin	Do not take the day before test or on day of test.
GLP-1 injections or tablets	Instruction
Exenatide (Byetta), Liraglutide (Victoza)	Daily injection: do not take the day before test or on day of test.
Exenatide SR, (Bydureon) Trulicity Semaglutide (injection)	Weekly injection: this can be stopped on the week of the test. Re-start this after the test, on the day you would normally have the injection.
Rebelsus (oral semaglutide)	Oral tablet: do not take the day before test or on day of test.

Getting your results

Results can take 4 to 6 weeks. This is because of the time it takes to look at the large number of images. We send your results to your referring doctor and GP. If results are needed right away, your doctor can contact us directly.

Contact details

If you have any queries or concerns about your test, please contact the Endoscopy Department (Level 2, Windsor Building, Leicester Royal Infirmary) on **0116 258 6997**. We are open Monday to Sunday, 8am to 6pm.

Out of these hours please contact **ward 42** at Leicester Royal Infirmary on **0116 258 6284**.

If you have any questions, write them down here to remind you what to ask when you speak to your nurse/ doctor:

[illegible]

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice
Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.
To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
 ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।
 إذا كنت ترغب في الحصول على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
 Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu
 જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કપા કરી ટેલિફોન કરો.

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net

We are a research hospital and you may be asked to take part in research