

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

Endoscopy Department

Information for Patients

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What is a capsule endoscopy?

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

It involves swallowing a capsule which is a tiny video recorder/ camera, and wearing a belt and a recording device for a whole day. The capsule will pass naturally through your digestive tract. As it does so, it sends back multiple images to the recorder. In order to obtain clear images it is important that you carefully follow the instructions given, before and after swallowing the capsule.

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).

How is the test done?

You will be asked to swallow the capsule after having a low fibre diet for 3 days. You will also follow a laxative regime which starts the evening before your appointment.

The capsule is the size of a large vitamin pill. It contains 2 tiny video cameras on a silicone chip and a wireless transmitter. The cameras are able to take 4 images per second. The capsule starts taking the photographs which are sent to a transmitter belt that you will wear for most of the day. From there, the images are sent to a pocket-sized data recorder which you will carry around in a shoulder bag.

You will be asked to swallow the capsule upon arrival to the Endoscopy Department on the day of your appointment, once the nurse has checked you in. We will also usually give you 1 tablet of domperidone in the hospital; this is to help move the camera through your gut throughout the procedure.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

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To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

You will then follow the rest of the instructions we give you at home. However, if you need to stay in hospital throughout the test, please let us know so arrangements can be made.

We will give you instructions to follow periodically throughout the day to make sure the capsule is passing through your bowel as needed. We will also 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 allowing clearer images to be obtained for an accurate diagnosis to be made.

You won't be able to eat most of the day.

The equipment can be removed 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 5.30pm 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.

Can there be complications or risks?

- There is a small risk that the test may need to be repeated if the bowel is not clean enough to see everything or if the camera moves through the digestive tract too quickly. If this happens, we will contact you to re-book.
- There is a small chance that the capsule may not pass through the small bowel. In our experience 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 doesn't 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 a dummy pill that is swallowed to make sure that there is no narrowing in your small bowel and that it is safe to swallow the capsule. If you need a patency capsule, further information will be given to you.
- 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 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 that does not need any pain relief or sedation.
- You are free to move around throughout the day and are not restricted to a bed, but we ask that you are as active as you are able to be.
- You can go about your day as normal once the capsule has been swallowed. You just need to make sure you return the equipment later the same day.
- You won't 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 etc.). **Please contact the Endoscopy Department before stopping aspirin.**
- If you take anti-coagulants (warfarin, aspirin, apixaban, dabigatran, rivaroxaban etc.), diabetes medication, or antibiotics as a preventative treatment for heart disease, please contact your doctor first.
- If you are diabetic, please read the additional 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.**
- **MRI scans are not permitted until the capsule has passed from your body.**
- The laxative Gastrografin will be given 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, so it can be replaced if needed.**

Please start a low fibre diet for 3 days before your test:

Some ideas for foods you can include in a low fibre diet:
White bread including rolls, toast, pitta bread, crumpets, wraps, naan and chapattis
White boiled rice
Dried or fresh white pasta
Dried or fresh white noodles
Yam
Dishes made with maize, millet or cornmeal
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

Avoid the following high fibre foods for 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 e.g: potato, pasta or rice salad.
	All fruits and vegetables
	All nuts, pulses, beans and lentils

The day before the test:

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

Evening before the test:

- You will have received bowel prep in the post. Please drink the first laxative mixed in 500ml of water, between 7pm and 9pm. Drink this as 200 to 250ml cup every 10 to 15 minutes if possible, until completely finished.
- Once finished, please then drink an extra 500ml of clear liquid.

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, until completely finished.
- Once finished, please then drink an extra 500ml of clear liquid which you should finish by 8am.
- Do not drink anything else. You will need to continue **not eating** too, until the capsule has passed out of your body.

- Dress in comfortable two-piece clothing.
- Please arrive at the Endoscopy Department at the appointment time given in your letter. On admission, you will be guided through the rest of the procedure with the support of a nurse.
We aim to keep waiting times to a minimum but 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 undertake emergency procedures which can take priority over our outpatient appointments.
- **Diabetic patients - see additional 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 include instructions for a further laxative regime to take while at home.
- If you develop unexplained abdominal pain, nausea (unrelated to the bowel prep) or vomiting and fever, please contact the Endoscopy Department on **0116 258 6997** for advice.
- The equipment can be removed after the capsule has passed out of your body. There is no need to continue with any laxatives once 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 will be 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.

Frequently 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 painful.
- **Can I drive home after the test?**
Yes. There are no after effects from the test.

Getting your results

Results can take 4 to 6 weeks due to the time it takes to look at the large number of images. Results are sent to your referring doctor and GP. If results are needed urgently, your doctor can contact us directly.

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 includes 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, and check your blood glucose level again. This is to prevent you having a hypo (when blood glucose level falls under 4mmol/L) due to the lack of food intake during required fasting.

- Before bed time we would like your blood sugar to be higher than 8mmol/L to ensure it doesn't 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: DiabetesNurseHelpline@uhl-tr.nhs.uk) for support. For out of hours please call 111 for advice. Please contact your usual diabetes care provider for any additional 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 inform staff on arrival of your diabetes and if you are having a hypo (blood glucose level under 4mmol/L), and the nursing staff will attend to 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, should 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	<p>Do not take these on the day before your test appointment because you will not be eating as normal.</p> <p>If you have any concerns about this please contact the diabetes nurse helpline or your usual diabetes care provider.</p>
Basal insulins: Lantus Levemir Insulatard Humulin I Insuman Basal Abasaglar Toujeo Tresiba Semglee	<p>Reduce the dose of these insulins by 20% for the day before the test and day of the test.</p> <p>For example, if you would usually take 10 units you will only take 8 units.</p>

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 Glipiride 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.

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.

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

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اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

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Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

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