

Capsule Endoscopy Information Guide

Your doctor has determined that you should undergo a procedure called a **Capsule Endoscopy** on the following date to enable further evaluation of your condition:

| APPOINTMENT DATE: | 1 | 1 | AT | AM |
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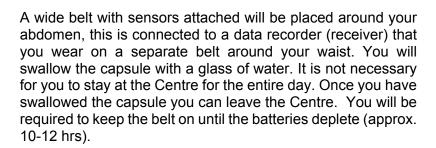
This information guide has been prepared to help you understand the procedure. It includes answers to questions most frequently asked by patients. Please read it carefully. Please feel free to ask your doctor any additional questions before you undertake the procedure.

What is a capsule endoscopy?

Capsule endoscopy is also known as pill-camera or wireless endoscopy. Capsule endoscopy helps your doctor determine the cause of recurrent or persistent symptoms such as abdominal pain, diarrhoea, bleeding or anaemia, where other diagnostic procedures failed to determine the reason for your symptoms. In certain gastrointestinal diseases, capsule endoscopy can also evaluate the extent to which your small bowel is involved or monitor the effects of therapy.

How is a capsule endoscopy performed?

The Southern Endoscopy Centre uses a capsule (the size of a large pill), which contains a tiny camera, batteries, light source and transmitter. After swallowing, the capsule travels like a piece of food through the gastrointestinal system. It provides high-resolution images of the stomach and small intestine, taking three images per second for up to 11 hours, which significantly increases the chances of observing all the findings as the capsule passes through the gastrointestinal tract.



For the first 6 hours after swallowing the capsule, you **MUST** drink 250mls of water every half hour, this will help transmit the capsule images. You may also eat a light meal 6 hours after swallowing the capsule. An additional information sheet will be provided to you on the day of your procedure containing more detailed instructions about what to do **DURING** your Capsule endoscopy; please read this carefully.





What happens after the Capsule endoscopy is performed?

At the end of the procedure, when all the lights have gone out approximately 10-12 hours after swallowing the capsule the data recorder (receiver) and sensor belt can be removed. All equipment is to be returned to the Centre the next day, before 12 Noon. The pictures obtained during your procedure will be downloaded onto a computer for the doctor to review. The capsule is disposable and passes naturally in a bowel movement, typically within about 24 hours. You will most likely be unaware of its passage. The information sheet that you will be provided with on the day of your procedure contains instructions about what to do **AFTER** your Capsule endoscopy; please read this carefully.



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What are the possible complications and associated risks?

Capsule endoscopy is a very safe procedure. Although complications may occur, they are rare when doctors who are specially trained and experienced in this procedure perform the test. To assist with the procedure, the capsule has a gel coating which makes it easy to swallow. Less than 1 patient in 100 has difficulty swallowing the capsule. Abdominal pain or nausea after swallowing the capsule is extremely rare and should be reported immediately to your doctor or nursing staff at the Centre.

Approximately 1 in 100 patients retain the capsule in the bowel. This may occur if the bowel is narrowed or has some other unusual anatomy. Usually the capsule will eventually pass. On rare occasions, it will need to be removed endoscopically or surgically. The obstructing lesion can be corrected at the same time.

On the day of the test, approximately 1 in 10 patients may have a slow small bowel transit and the capsule may not be seen to reach the large bowel on the capsule endoscopy recording. An abdominal X-ray will then be arranged to check that the capsule has passed out of the bowel. Patients wearing the belt and data recorder (receiver) are advised to stay away from large radio transmitters (e.g. TV transmission towers) and are advised not to visit airports and major shopping centres where the harness could trigger security screening equipment.

What do I need to do to prepare for the capsule?

You need to ensure that you follow these important steps:

- If you are on **IRON TABLETS** these must be ceased at least **5 DAYS** prior to your procedure;
- If you smoke, REFRAIN FROM SMOKING 24 HOURS prior to your procedure; and
- If you are a DIABETIC; have a PACEMAKER; have undergone previous ABDOMINAL SURGERY; have had a previous BOWEL OBSTRUCTION or have difficulty in SWALLOWING, please contact the Southern Endoscopy Centre so you can obtain further instructions.

| On the DAY BEFORE your procedure: | 1 1 | |
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- You may have a light breakfast and light lunch **before 12PM** (noon) on the day prior to your procedure (e.g. one or two slices of toast (no grains/seeds); soup or light sandwich (no grains/seeds);
- After 12PM (noon) consume only clear fluids (e.g. water, clear apple juice, lemon cordial);
- You may continue to consume clear fluids throughout the day and evening.

| On the DAY of your actual procedure: | 1 | 1 |
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- **DO NOT** have anything to eat today, as this will affect your capsule endoscopy procedure;
- YOU MAY continue drinking water until your appointment time;
- **DO NOT** take any medication within **2 HOURS** of arriving at the Southern Endoscopy Centre;
- ARRIVE at the Centre dressed in comfortable, loose fitting clothing (e.g. shirt and pants or shirt and skirt etc.)

You will be at the Southern Endoscopy Centre for approximately **1 HOUR** in the morning. You will then be required to return the equipment to the Centre the next working day, prior to 12 Noon.

| Special instructions (if any) from your Doctor are provided below: | | | | | |
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Thank you for choosing the Southern Endoscopy Centre. If you have any further questions, comments or concerns please don't hesitate to contact the Centre on **8294 9355**.