

**Patient
Information**

Having a Video Capsule Endoscopy (VCE)

Introduction

A Video Capsule Endoscopy (VCE) is an investigation which allows your small bowel to be viewed. This is past the point where traditional endoscopy, such as gastroscopy (looking in to your stomach) or colonoscopy (looking at your large bowel) can reach.

This leaflet contains information about having a VCE and answers some of the commonly asked questions. It is important that you read this leaflet before having the investigation.

If you have diabetes, you may need specific advice regarding your medication. The doctor will discuss this with you.

If you are prescribed iron tablets, please stop taking them for 7 days before your appointment.

The investigation will take less than 1 hour.

What is a VCE?

The VCE investigation involves swallowing a small capsule, about the size of a large jelly bean. The capsule contains a miniature camera which will pass naturally through your digestive system, taking pictures of the bowel. The camera sends information to a data recorder worn on a shoulder strap, this can be in the form of a sensor array (group of sensors), which is stuck to your skin with pads or worn as a sensor belt.

The battery within the camera lasts for about 12 hours and the capsule can take pictures for this length of time.

The capsule is disposable and will be passed in your bowel movement. You do not need to retrieve it.

Why do I need to have a VCE?

You have been advised to have this procedure to try and find the cause of your symptoms, help with treatment and if necessary, to help decide on further investigations.

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Department

Endoscopy

Review due

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There are many reasons for having this investigation such as anaemia, weight loss, unexplained bleeding and diagnosis of inflammatory bowel conditions.

There are no alternatives to this procedure.

Before the procedure

Please bring a list of any medication you are currently taking (including sprays and inhalers) to your appointment.

To allow a clear view, your stomach needs to be empty of food, so please follow these instructions:

- After midday (the day before your appointment) please eat a 'sloppy diet', soup would be suitable. Avoid eating fried foods and seeds.

It is important to continue drinking water up to the time of the investigation.

On admission

- You will be asked to sign a consent form. By signing this form you have agreed to have the investigation performed and that you understand why it is needed
- You will be asked to loosen your top garments. It is advisable to wear a button through top if possible
- You will be asked to lie on an examination couch. The doctor or nurse will place 8 adhesive sensory pads across your abdomen and 1 on your chest. Or a sensor belt will be fitted
- The sensory pads are connected to the data recorder via cables. There is a strap attached to the recorder which allows it to be worn across the body so that it is secure
- Once connected, you may sit up. You will then be asked to swallow the capsule, you will be given a glass of water

After swallowing the video camera (capsule)

You must drink about 250mls of water (1 glass) every hour. After 4 hours you can have a light snack; 8 hours after swallowing the capsule you can eat and drink normally.

You will need to remove the recorder, shoulder strap and sensory pads or the sensor belt after 12 hours. The nurse will show you how to do this before you go home.

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The pads and belt are disposable and can be thrown away but the data recorder must be returned to the hospital the following working day.

On arrival at the hospital, please ask the volunteer at the reception desk to contact Dr Makins' secretary who will then meet you the desk. This is located at the Sandford Road entrance.

The capsule itself is disposable and will be passed in your stools. It does not need to be retrieved and returned.

Complications

The only possible complication with this procedure is capsule retention which can happen if there is a narrow segment within the gut and the capsule cannot pass. Should the capsule become stuck (less than 1 in 100 cases), then you may either need an endoscopy to remove it or in the worst case scenario, an operation.

If the capsule has not been seen to pass into the large bowel by the end of the recording, you may need an X-ray to determine whether the capsule is still in the bowel. Your doctor will tell you if this is necessary.

Capsule endoscopy is not usually performed on patients who are pregnant.

Going home

After you have swallowed the capsule, you will be able to go home or return to work.

Will I need further treatment?

Your doctor will contact you to discuss when you need to return to the clinic.

Contact information

If you have any problems, you can contact:

Dr Makins' secretary
Tel: 0300 422 2387

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Outside of office hours you can contact the on call GI Consultant via the hospital switchboard.

Hospital switchboard

Tel: 0300 422 2222

When prompted please ask for the operator then for the on call GI consultant

Alternatively contact your GP or NHS 111.

NHS 111

Tel: 111

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