

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 gives you 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 taking iron tablets, please stop taking them for 7 days before your appointment.

The appointment 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 or kidney bean. The capsule contains a miniature camera which will pass naturally through your digestive system, taking pictures of your bowel. The camera sends the information to a data recorder worn in a small satchel. A sensory array (group of sensors) is connected to the data recorder and is worn in the form of a disposable belt. In some circumstances sticky pads may be used instead of the belt.

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

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Department

Endoscopy

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Patient Information

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.

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

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.
- From midnight the night before your appointment, drink water only.
- If you take medication in the morning that cannot be delayed, please call 0300 422 2387 to discuss whether it can be taken before or after you have swallowed the capsule.

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, or T-shirt.
- A sensor belt will be fitted while you are standing. Occasionally you may be asked to lie on an examination couch and adhesive pads will be placed on your abdominal wall as an alternative method.
- The belt/sensory pads are connected to the data recorder. There is a strap attached to the recorder which allows it to be worn across the body like a satchel so that it is secure.
- Once connected, you will then be asked to swallow the capsule, with water.

Patient Information

After swallowing the video camera (capsule)

You should drink at least 250 mls of water (1 glass) every hour. After 4 hours you can revert to eating and drinking normally.

You should continue drinking water.

You will need to remove the recorder after 12 hours. You will be shown how to do this.

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 along with the satchel and strap.

On arrival at the Sandford Road entrance at Cheltenham General Hospital, please ask the volunteer at the reception desk to contact Dr Makins' secretary. You can leave the recorder with the volunteer for the secretary to collect.

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

Complications

The most common recognised complication of this procedure is capsule retention. This 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 every 1000 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 your 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 and continue with your normal daily activities.

**Patient
Information**

Will I need further treatment?

Your referring consultant will contact you to discuss when you need to return to the clinic. The capsule endoscopy report will be forwarded to your referring consultant.

Results

Please contact your GP or consultant directly for your test results as these are not disclosed to Endoscopy.

Contact information

If you have any questions, you can contact:

Dr Makins' secretary

Tel: 0300 422 2387

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

Gloucestershire Hospitals Switchboard

Tel: 0300 422 2222

When prompted, please ask for the operator for the on call Medical Gastroenterology Consultant.

Alternatively contact your GP or NHS 111.

NHS 111

Tel: 111

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>