

# Capsule videoenteroscopy. Obtaining images of the intestine safely and accurately

The video-capsule is a simple, safe and non-invasive diagnostic exam that permits the visualization of all segments of the small intestine. It measures about 1½cm x 2½cm. It contains a light source and camera that captures images and records them, through sensors placed on the patient's body and a receiver that is attached to the patient's waist.

Since the introduction of the first endoscopic capsule in the year 2000, it has become an essential exam in the investigation and diagnosis of diseases of the small bowel, as it reaches places that other essential endoscopic exams (high endoscopy and colonoscopy) do not reach.

The first step is to prepare the intestine, leaving it clean so that it can be correctly observed. The preparation consists of the ingestion of a liquid laxative together with a liquid diet beginning the day before the exam. This step is critical to ensure that the surface of the intestine can be completely analysed. After this first step of

bowel preparation, the capsule is swallowed with water, making its way along the digestive tract, propelled by normal digestive movements. Over 14 hours, the capsule records images as it makes its way through the intestine. During this exam, there is no need for hospital admission and the patient can go on with his normal life. The images are then processed and viewed on a monitor by the Gastroenterologist. After 24 -72 hours, the video capsule is eliminated naturally with the faeces.

Deciding on the need to undergo any diagnostic exam is always taken by the physician, depending on the patient's individual charac-

teristics, complaints or illness.

As a rule, this exam is indicated in cases of obscure digestive haemorrhage; iron deficiency anaemia; in the diagnosis and classification of Crohn's disease; in celiac disease; in the diagnosis of small bowel tumours and hereditary polyposis syndromes.

As with any other medical exam, the video-capsule has its limitations. It is not possible for example, to obtain samples or perform any therapeutic procedure during the exam. It also has contraindications, which include the existence or suspicion of strictures, intestinal obstructions or fistulas.



Given its excellent safety profile, greater tolerance, the possibility of a complete evaluation of the small intestine and high diagnostic capacity, the endoscopic video-capsule is the best non-invasive method to assess this organ. However, as with any other medical exam where devices or medication are used, some associated risks exist. The greatest risk associated with this

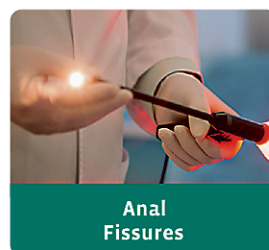
exam is the retention of the video-capsule in the digestive tract. This may result in the need for an X-ray to locate and identify the cause of this having occurred, and eventually having to undergo a double balloon enteroscopy, or in extreme cases, a surgical intervention to remove the capsule. However, in the vast majority of cases (99%) the video-capsule is disposed of without problems.

Because your health is of Particular Importance.

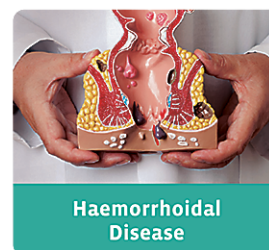


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