

The effectiveness of an extended bowel preparation regimen in capsule endoscopy

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Presentation

Small Intestine & Nutrition

Surgery

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Neurogastroenterology & Motility

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A three-year retrospective study of 220 patients found that an extended polyethylene glycol bowel preparation protocol (three sachets instead of one or two) significantly reduced small bowel capsule endoscopy transit times and improved image quality.

KEY POINTS

- The speaker reported that the extended preparation protocol achieved majority of transit times within three hours, representing approximately a 60% improvement compared to standard protocols where some patients experienced transit times over nine hours.
- The speaker stated that 75% of patients receiving the extended preparation had much clearer imaging with less fecal material interference.
- The extended protocol became the standard at the speaker's hospital and enabled reading 3-4 capsule studies in the time previously required for one (ten hours).
- Patients experienced earlier resumption of eating and fewer problems for diabetic patients due to faster transit times, though some initially complained about taking three sachets.
- Bedbound patients were excluded from the study because the speaker reported 60-70% of such patients had the capsule still in the small bowel when battery life ended, even with prokinetics.
- In the Q&A, the speaker defended choosing polyethylene glycol despite lower tolerability, prioritizing efficacy and safety over volume and taste concerns when selecting bowel preparations.

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