

AGE, BMI, AND BOWEL HABITS AS PREDICTORS OF PATENCY CAPSULE FAILURE IN PATIENTS PREPARED WITH A PRO-MOTILITY PROTOCOL

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Poster

Oesophagus

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In a retrospective study of 392 patients using a pro-motility protocol for patency capsule testing before video capsule endoscopy, capsule retention occurred in 17.6% and was primarily associated with higher BMI and fewer bowel movements per day.

KEY POINTS

- Successful patency capsule expulsion occurred in 82.4% of patients (323/392), with no subsequent video capsule retention in the 321 who proceeded to VCE.
- Multivariate analysis identified higher BMI (OR 1.063, 95%CI 1.005-1.125, $p=0.034$) and fewer than one bowel movement per day (OR 2.418, 95%CI 1.153-5.071, $p=0.019$) as independent risk factors for capsule retention.
- A classification tree model showed failure probability ranged from 0% in younger patients with BMI under 21 kg/m² to 66.7% in those with BMI over 37 kg/m², with bowel movement frequency, age, and BMI serving as key predictors (AUC 0.705).
- The pro-motility preparation protocol consisted of a low-residue diet, liquid diet, and 10 mg bisacodyl at capsule ingestion, applied to patients referred primarily for suspected or established Crohn's disease (86.0%).
- The authors conclude that simple clinical parameters including BMI and bowel frequency may help identify high-risk patients and improve patency capsule test success.

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