

PROOF



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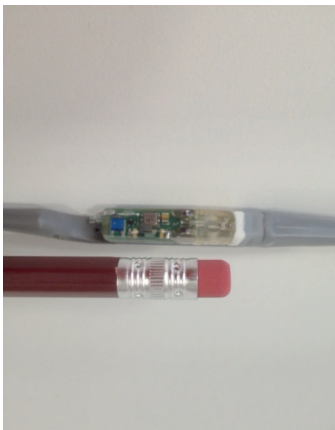
Catheter free Bravo Capsule 48 hour pH study with gastroscopy (whilst taking PPI medication)

Manchester Royal Infirmary



Introduction

Your consultant has referred you for a Bravo capsule 48 hour pH study because you are having problems with your stomach. The most common reason for referral for this test is heartburn/acid reflux.



BRAVO capsule when attached to delivery system using a pencil for scale.

What is a Bravo capsule pH study?

This test is used to examine the amount of acid passing up from the stomach into the food pipe. The Bravo capsule is a small pill

that attaches to the lining of your oesophagus above the entrance to your stomach. The capsule sends wireless signals to a receiver to record the acid levels in the oesophagus over a period of 48 hours.

What do I need to do before the test?

You will be sent a letter from the Endoscopy unit that will tell you how to prepare for a Gastroscopy procedure. Please follow these instructions.

For the Bravo study, please continue to take antacid medications as prescribed, if you currently do so.

These include:

- Lansoprazole (Zoton)
- Omeprazole (Losec)
- Pantoprazole (Protium)
- Rabeprazole (Pariet)
- Esomeprazole (Nexium)
- Ranitidine (Zantac)

What does the test involve?

You will be asked to attend the Endoscopy Unit, where they will prepare you for a gastroscopy procedure (see gastroscopy leaflet). During the gastroscopy, the endoscopist will insert a camera down your oesophagus and into your stomach. This is to measure where to place the Bravo capsule and also to check if there are any problems that would make them

unable to attach the capsule e.g. a very inflamed oesophageal lining.

The camera will then be removed and the Bravo capsule will be inserted through your mouth and down your oesophagus to the required position. The capsule is then attached to the lining of your oesophagus, using a delivery device. It will then transmit signals to a receiver. The receiver is about the size of a mobile phone and can either be carried in an over shoulder pouch or clipped onto your belt.

The capsule will send signals to the receiver for 48 hours, when the receiver will stop recording automatically. The capsule will stay attached to the lining of your oesophagus for between 5-12 days. After this time, it will fall off naturally and pass through your digestive system.

Will it be painful?

It should not be painful. It may be uncomfortable during the procedure and you may feel a strange sensation in the oesophagus, where the capsule was placed. Some patients have reported discomfort when swallowing. If you experience this,

chewing carefully and drinking liquids may help minimise this sensation.

You might also experience some chest discomfort. You can take simple pain relief such as paracetamol and ibuprofen to help ease this. However if the pain becomes severe, please contact the Endoscopy department (Mon-Fri 8.00am-6.00pm) or go to your nearest A&E department.

What do I do during the test?

Before you leave the Endoscopy department, a Clinical Physiologist will discuss a diary sheet with you. Over the 48 hour test period, you will be asked to complete a diary listing your activities such as; eating, drinking, having a shower etc. You can eat and drink as normal during the study.

You can shower/bathe during the test but do not take the receiver in with you as it is not waterproof. The receiver can pick up signals from the capsule up to 3 feet (1 metre) away. So you can leave it in a safe, dry place nearby when you bathe and put it back on when you are dry.

How do I care for the receiver?

During the 48 hour study period, you need to ensure the receiver is with you at all times and that it is kept dry.

The receiver may beep during the procedure. It can also either show a 'C1' message on the screen on top, or have a flashing red LED light at the bottom. This can be due to:

- The receiver being out of range from the capsule.
- External interference – Wireless broadband, Wifi, Bluetooth devices and mobile phones may use the same frequency as the capsule.

If this happens:

- Bring the receiver close to your chest bone and keep it there until the flashing C1 message disappears or until the red light changes to blue. Then keep the receiver within 3 feet (1 metre) distance of your chest.
- Stop using your wifi/wireless broadband and move away from any potential source of interference.

- If these actions do not work, please ring the department on 0161 276 4612 (Mon – Fri 9.00am – 5.00pm).

Will I be able to take any medicine for indigestion during the test?

Yes. Your consultant has asked for you to continue taking your indigestion medication during this test. These include: Lansoprazole (Zoton); Omeprazole (Losec); Pantoprazole (Protium); Rabeprazole (Pariet); Esomeprazole (Nexium) and Ranitidine (Zantac). This is to determine whether the medication is effective in preventing acid reflux or not.

Therefore please take your indigestion medication as normal and record it on the diary sheet. However you will not be able to take gaviscon, gastrocote, or any other liquid based antacids as these will coat the capsule and give a false result.

Is the test suitable for all patients?

The test is not suitable for everyone. If you have bleeding disorders,

strictures, severe oesophagitis, varices, obstructions, pacemaker or implantable cardiac defibrillator, you should not undergo a Bravo procedure.

Additionally because the capsule contains a magnet, you should not have a Magnetic Resonance Imaging study within 30 days of undergoing a Bravo pH study. This to ensure that the capsule has passed out naturally from your body.

Benefits and risks

The Bravo study is a good alternative to measure acid reflux in patients who cannot tolerate a tube down the nose for 24 hours.

Complications are very rare and those associated with gastroscopy are documented in the leaflets sent with your appointment letter. Potential complications with the Bravo pH capsule include:

- Tears in the lining of the oesophagus.
- Perforation of the oesophagus.
- Premature detachment of the capsule.

What happens next?

Once the study has been completed, you will be asked to return the receiver and your diary sheet to the GI Investigations Unit. It is very important that you return the receiver promptly on the day agreed with the Clinical Physiologist as the receiver is needed for use by other patients.

The recording will be uploaded and the results sent to your consultant. The consultant will write to you to arrange an outpatient appointment where they will explain the results to you and discuss further treatment.

Any questions?

If you have any questions please contact us using the details below.

GI Investigations Unit,
2nd Floor
Gastroenterology, Hepatology and
GI Investigations Building
Manchester Royal Infirmary
Oxford Road
Manchester M13 9WL

0161 276 4612 (Mon-Fri 9.00am-
5.00pm)

No Smoking Policy

Translation and Interpretation Service

Please protect our patients, visitors and staff by adhering to our no smoking policy. Smoking is not permitted in any of our hospital buildings or grounds, except in the dedicated smoking shelters in the grounds of our Hospital site.

It is our policy that family, relatives or friends cannot interpret for patients. Should you require an interpreter ask a member of staff to arrange it for you.

For advice and support on how to give up smoking, go to www.nhs.uk/smokefree.

تنص سياستنا على عدم السماح لافراد عائلة المرضى او اقاربهم او اصدقائهم بالترجمة لهم. اذا احتجت الى مترجم فيرجى ان تطلب ذلك من احد العاملين ليرتب لك ذلك.

بماری یہ پالیسی ہے کہ خاندان ، رشتہ دار اور دوست مریضوں کے لئے ترجمہ نہیں کر سکتے۔ اگر آپ کو مترجم کی ضرورت ہے تو عملے کے کسی رکن سے کہیں کہ وہ آپ کے لئے اس کا بندوبست کر دے۔

ইহা আমাদের নীতি যে, একজন রোগীর জন্য তার পরিবারের সদস্য, আত্মীয় বা কোন বন্ধু অনুবাদক হতে পারবেন না। আপনার একজন অনুবাদকের প্রয়োজন হলে তা একজন কর্মচারীকে জানান অনুবাদকের ব্যবস্থা করার জন্য।

Nasze zasady nie pozwalają na korzystanie z pomocy członków rodzin pacjentów, ich przyjaciół lub ich krewnych jako tłumaczy. Jeśli potrzebują Państwo tłumacza, prosimy o kontakt z członkiem personelu, który zorganizuje go dla Państwa.

Waa nidaamkeena in qoys, qaraaboamasaaxiiboaysanu tarjumikarinbukaanka. Haddiiaad u baahatotarjumaankacodsoxubinka mid ah shaqaalahainaykuusameeyaan.

我们的方针是，家属，亲戚和朋友不能为病人做口译。如果您需要口译员，请叫员工给您安排。



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