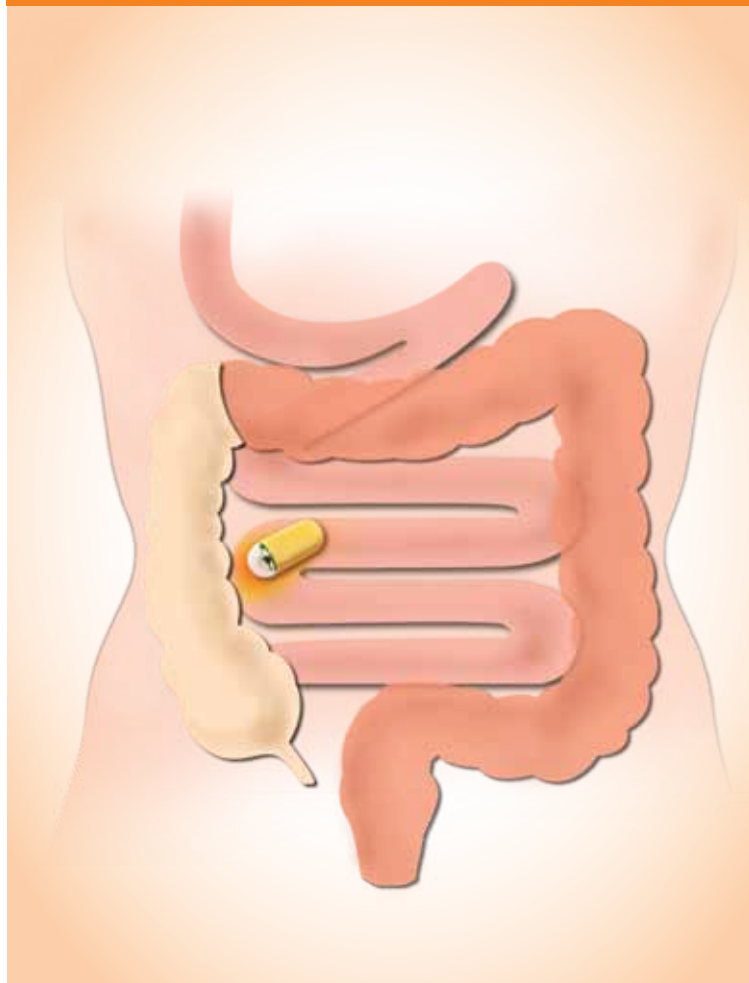


外科中心 Surgery Centre

膠囊內視鏡檢查



查詢或預約，歡迎聯絡我們

外科中心

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辦公時間

星期一至星期五：上午九時至下午五時
星期六：上午九時至下午一時
星期日及公眾假期休息

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養和醫院
Hong Kong Sanatorium & Hospital

外科中心
Surgery Centre

膠囊內視鏡檢查是利用吞服式內置無線攝錄機的膠囊，進行無痛內鏡消化系統攝影，以評估隱性出血、腹痛、貧血等消化道問題。

膠囊內視鏡是怎樣施行的？

檢查時，病人須吞服一粒附有內置攝影功能的膠囊（11毫米 x 26毫米）；膠囊經過消化道時，會拍攝腸內情況，把彩色影像傳送到貼在病人腹部的接收器，並記錄於記錄儀上。記錄儀會用腰帶掛在病人的腰部，因此不會妨礙病人的正常活動。

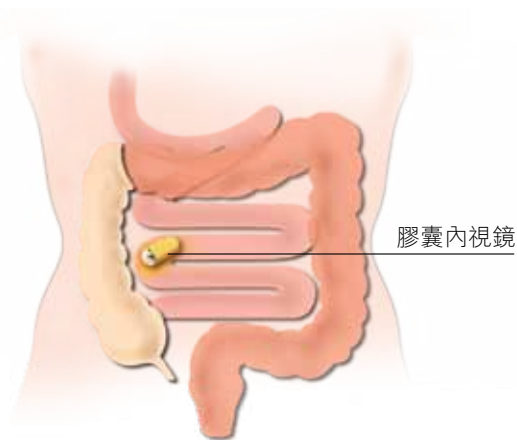
一般來說，膠囊在胃內停留約一小時，而經過小腸則要三個半至四小時。腸胃科醫生亦須用兩小時審閱所接收的影像。

為什麼要施行膠囊內視鏡檢查？

膠囊內視鏡檢查能幫助醫生診斷一些復發性或持續性，但又經其他診斷方法仍找不到原因的症狀，如：腹痛、腹瀉、流血或貧血。

膠囊內視鏡檢查前有什麼須要預備？

1. 檢查前一天，須作腸道準備。
2. 接受膠囊內視鏡檢查前八小時不可飲食。
3. 你的腹部會被貼上接收器，再接駁記錄儀，並用腰帶掛在腰部。
4. 依指示飲用少量清水吞服膠囊。
5. 吞服膠囊後，須繼續禁食兩小時。
6. 依醫生指示，方可開始流質飲食。
7. 八小時後，接收器、記錄儀及腰帶會被除去。



8. 依醫生指示，便可恢復正常飲食。
9. 檢查當日，須記錄飲食及活動的情況及時間。

膠囊內視鏡檢查後會有什麼結果？

檢查完畢後，專科醫生會審核所有接收的影像。一般來說，膠囊將隨大便於二十四小時內排出並棄置。

膠囊內視鏡檢查有什麼禁忌症及危險？

1. 由吞服膠囊至其排出體外前，不能接受磁力共振檢查或接近磁場。
2. 如病人體內置有心臟起搏器，可在特別安排下接受檢查。
3. 已被診斷為小腸狹窄病者，須視乎個別情況方可接受是項檢查。若膠囊由於腸道梗阻而不能自行排出體外，可能須用內鏡或手術除去。

外科中心 Surgery Centre

For enquiries and appointments,
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Service Hours

Monday to Friday: 9:00 am – 5:00 pm

Saturday: 9:00 am – 1:00 pm

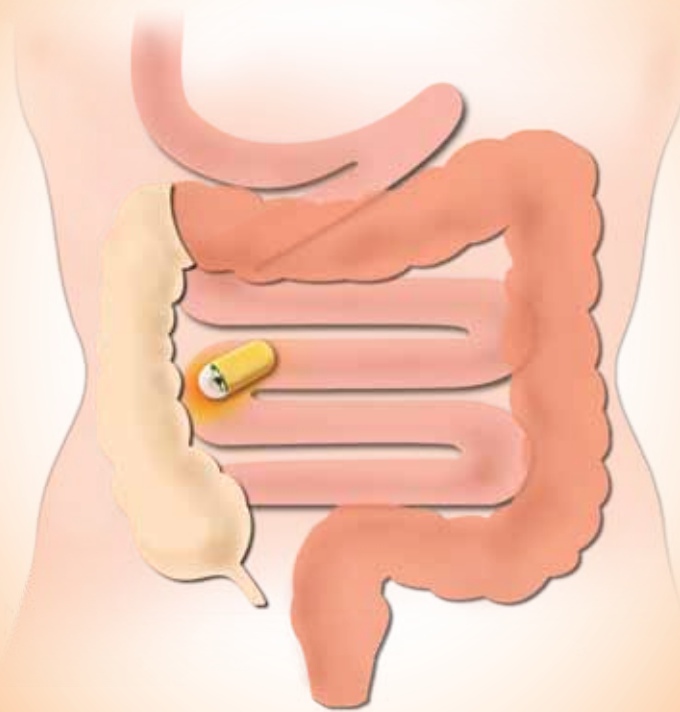
Closed on Sundays and Public Holidays

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Capsule Endoscopy



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The capsule endoscopy (CE) system utilizes a wireless swallowable video camera to perform painless endoscopic imaging of the intestine especially in the evaluation of obscure bleeding, anaemia, abdominal pain.

How is Capsule Endoscopy performed?

The CE is a 11mm x 26mm capsule (Vitamin-pill sized) that encases a digital camera, light source, batteries, and a transmitter. Natural peristalsis moves the capsule smoothly and painlessly throughout the gastrointestinal tract. Colour images are taken and transmitted to a recording device worn on a belt by the patient.

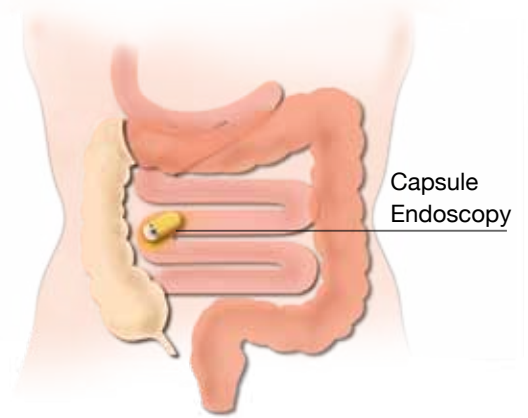
It takes approximately two hours for a gastroenterologist to review the series of images produced. The capsule has a gastric transit time of approximately one hour and a small intestinal transit time of three and a half to four hours.

Why is Capsule Endoscopy performed?

Capsule Endoscopy helps your doctor determine the cause of recurrent or persistent symptoms such as abdominal pain, diarrhea, bleeding or anemia, in most cases where other diagnostic procedures failed to determine the reason for your symptoms.

How should I prepare for the procedure?

1. Bowel preparation the day before examination.
2. Do not eat or drink for 8 hours prior to the examination.
3. The Sensor Array will be attached to your abdomen with adhesive pads and will be connected to the Data Recorder which you will wear in a belt around your waist.
4. Ingest the capsule with a small amount of water.
5. Do not eat or drink for 2 hours after the ingestion.
6. Resume fluid intake as your physician advises.



7. After 8 hours, the Data Recorder, Recorder Belt and Sensor Array will be removed.
8. Resume normal diet as your physician advises.
9. Patients should keep a timed diary related to eating, drinking and daily activities on the examination day.

What happens after Capsule Endoscopy?

The images acquired during your examination will be downloaded to a workstation for physician review. The capsule will usually be eliminated through a normal bowel movement within 24 hours of ingestion. The capsule is discarded after use.

What are the risks of Capsule Endoscopy?

1. You should not have a Magnetic Resonance Imaging (MRI) examination or be near an MRI device.
2. Patients with pacemakers can have the examination with special cautions.
3. Patients with known small bowel stricture may not be suitable for capsule endoscopy. If the capsule is not excreted naturally due to bowel obstruction, it will need to be removed endoscopically or surgically.