Current Status of Capsule Endoscopy Registry and Future Directions

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Medicine has advanced to the frontier of science. Medical practices has been standardized through the accumulation of vast and diverse experience and logical analysis of these data. Large scale experiments and clinical researches is foundation of these valid knowledge in medicine. Small intestine was a dark area where man cannot reach and investigate. Capsule endoscopy is small digital camera which is small enough to be swallowed and equipped with wireless image transfer device. Capsule endoscopy enables small intestinal investigation and diagnose various small intestinal diseases such as tumors, inflammatory diseases, and vascular and anatomical abnormalities. However, the cost of capsule endoscopy is very expensive compared to other conventional endoscopic and radiologic examination. The need for small bowel investigation is quite low in frequency. With these reason, the experiences of capsule endoscopy is limited for individual physician. Registry of capsule endoscopy is a way to overcome the rarity of clinical experiences and establish a large scale clinical researches.

Capsule endoscopy registry was established in 2008. Nationwide institutes participate and accumulated over 3 thousand cases. Meaningful clinical researches have been carried out and published on the base of the registry. Small bowel tumor, capsule endoscopy retention, bowel preparation, obscure gastrointestinal bleeding, small bowel change from portal hypertension, NSAID induced enteropathy were the previous clinical interests and themes of capsule endoscopy registry.

Eight years experience of capsule endoscopy registry now give us new insights for future. Most of all, the socio-medical environment has changes. The patient safety issue is also considered first. Institutional review and informed consent should be included. The convenience for data provider and user is another important issue. The interface of web site and variables must be renewed to provide better web environment and enable to support the researcher’s need. Of course, these renovation must cost more.

The most important value of capsule endoscopy registry lies on the publicity of collected data. Institutes from the most areas in Korea provide the data. The data includes not only the clinical information but also the medico-statistical information. The frequency, pattern and indication of medical use are also the valuable part.

The key to future of capsule endoscopy registry is the content. New ideas about meaningful values are warranted. The survival, quality of life and cost-benefit should all be considered themes. The results of research should contribute the daily life of our future mankind. The national medical insurance system decided to reimburse the cost of capsule endoscopy in patients with obscure gastrointestinal bleeding, small bowel tumor, Crohn’s disease and other small bowel diseases. The medical policy may ease the clinical decision of physicians and increase the usage of capsule endoscopy. Increased and broadened usage of capsule endoscopy may be good news for researchers. And at the same time, the responsibility of researchers who use the clinical data registry also weighed more. We hope the future of capsule endoscopy registry will be bright as it was in the past.