Wireless capsule enteroscopy – Guide to diagnosis of small intestinal disease

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The development of capsule endoscopy (CE) ushered by the pivotal work of Swain and colleagues in 2000, opened a new window in the diagnostic evaluation of small intestinal disease. Small bowel has always been a difficult organ to visualize. Imaging techniques with computed tomography (CT) and magnetic resonance imaging (MRI), having replaced barium studies, contributed to better detection of small bowel disease, but there are limitations in the diagnostic value and accuracy of CE with clinical experience accumulating in endoscopic centers and increasing applied expertise, we are currently in a better position to define the diagnostic value and contribution of CE in the visualization of small intestine. Inter-observed variation is satisfactory in experienced endoscopists, but considerable variation exists in the terminology and classification of findings.

The book under review on wireless capsule enteroscopy, edited by N. Kalantzis and the late A. Avgerinos represents a significant contribution in the application of CE, based on the experience of two Gastroenterology Departments in Athens, the NIMTS and Evangelismos Hospital. This publication is the first substantial recording of the application of CE in Greece, but its value extends also to a European and international level.

As a multiauthor book it retains a homogeneous structure and content, and achievement in itself, based on the careful selection of authors and the well-defined targets set by the editors.

The layout is highly readable and informative. The individual 14 chapters follow an evolutionary pattern, including the imaging methods of the small intestine, the historical development of the wireless capsule, the technical characteristics and the description of the procedure with indications, contraindications and complications. Individual chapters are assigned to the principal indications of CE, namely obscure GI bleeding, Crohn’s disease, tumors of small intestine, malabsorption syndrome and NSAID – induced lesions of small intestinal mucosa, a topic of considerable clinical importance.

The chapters are written with clarity, critical spirit and they are characterized by clinical relevance. The inclusion of representative images of a wide spectrum of lesions of small intestine with excellent color reproduction is one of the assets of the book, enhancing its educational value and serving as a diagnostic guide of small intestinal disease, as rightly the subtitle of the book indicates. Each chapter closes with key references, which are dated and constitute recent publications in each area. The spectrum of the book is further augmented by chapters on the application of CE in Pediatric Gastroenterology, the evolving use of CE in esophageal, gastric and colonic disease, the newer technological developments of the capsule and most importantly with data on the comparison of diagnostic evaluation of CE with conventional barium studies, CT and push enteroscopy. For the sake of completion, a chapter is also included on the pathology of small intestinal disease with representative color slides of light microscopy, which complements the spectrum of small intestinal disease.

All in all it is a book which is a pleasure to read, informative, relevant to clinical GI practice with excellent illustrations and based to a large extent on experience, an important factor in endoscopic practice and medicine in general.

I would recommend that the book is also published in English for international readership, as it is considered a current worthy publication on an evolving new area of endoscopy.