

## Letters to the Editor

### Survey on the use of capsule endoscopy for patients with known or suspected Crohn's disease in Spain

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*Key words: Crohn's disease. Capsule endoscopy. Inflammatory bowel disease.*

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Dear Editor,

Recently your journal published a comprehensive review of the indications of the use of capsule endoscopy (CAEN) in patients with Crohn's disease (CD) (1). Also published in 2013 were the consensus guidelines of the European Crohn's and Colitis Organization (ECCO) regarding the use of endoscopic techniques in patients with inflammatory bowel disease (IBD) (2).

We report the results of a survey of gastroenterologists and radiologists in Spain on the use of different endoscopic techniques and imaging in patients with CD (Raymond Study). Within this survey there was a specific section completed by gastroenterologists (n = 225, of which 67.6% are specialized on the treatment of patients with IBD) regarding the use of CAEN.

Among the results, there are two that we consider of great interest for their clinical relevance.

The first is the percentage of surveyed gastroenterologists who have access to the use of CAEN (63.1%), meaning that 36.9% of gastroenterologists surveyed do not have access to this endoscopic technique (Fig. 1).

The second important result refers to the use of the Patency® capsule (CAEN-Pat®) in clinical scenarios of patients with suspected CD or CD already known. Of those gastroenterologists surveyed, 25.3% never use CAEN-Pat® in these situations.

The percentage of use of CAEN-Pat® is higher in medical centres with the highest number of hospital beds (34.6% vs. 19.4%) and centres with the most extensive monitoring of patients with IBD (33% vs. 20%).

#### Discussion

CAEN is recognized as a valuable technique for diagnosis of patients with suspected CD with small bowel (SB) involvement and those with CD already known in which the assessment of SB could modify the therapeutic approach.

This technique, which can provide relevant information with impact on medical-surgical management of patients with CD (1,3), is not available, as we have seen in the results of the survey, to 36.9% of gastroenterologists who are dedicated to the treatment and monitoring of patients with CD.

We believe that the use of this technique should be extended so that no patients are penalized due to their attending physician not having access to it.

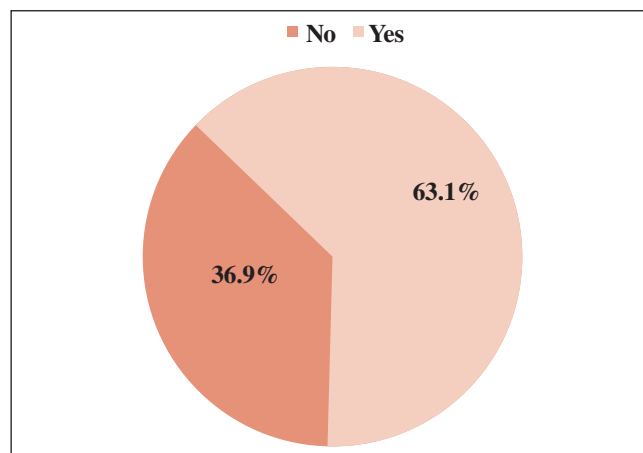


Fig. 1. Access of surveyed gastroenterologists (n = 225) to capsule endoscopy in patients with luminal CD.

Furthermore, it is noteworthy that 25.3% of gastroenterologists surveyed never consider using CAEN-Pat® in patients with suspected or established diagnosis of CD since there is the risk of impaction of the endoscopic capsule if there is stenosis. This concern is also reflected in recommendation 11H of the consensus guidelines adopted by the ECCO (2).

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