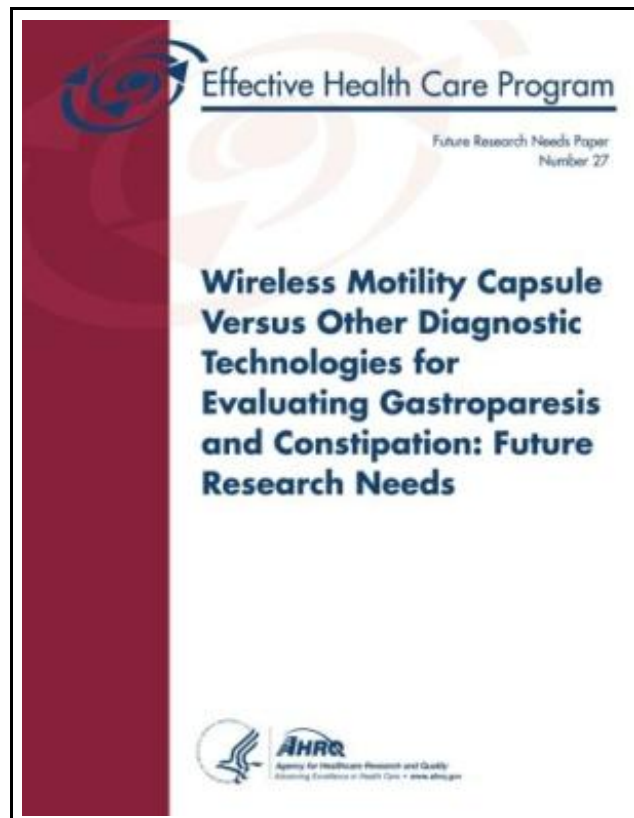


# Wireless Motility Capsule Versus Other Diagnostic Technologies for Evaluating Gastroparesis and Constipation: Future Research Needs: Future Research Needs Paper Number 27



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## ***Reviews***

*The publication is great and fantastic. It is packed with knowledge and wisdom You will like how the article writer publish this publication.*


*(Mrs. Alta Kling V)*

## **WIRELESS MOTILITY CAPSULE VERSUS OTHER DIAGNOSTIC TECHNOLOGIES FOR EVALUATING GASTROPARESIS AND CONSTIPATION: FUTURE RESEARCH NEEDS: FUTURE RESEARCH NEEDS PAPER NUMBER 27**



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Createspace. Paperback. Book Condition: New. This item is printed on demand. Paperback. 64 pages. Dimensions: 11.0in. x 8.5in. x 0.1in. Gastroparesis delays gastric emptying without a physical blockage. Its symptoms are nausea, vomiting, early satiety, bloating, abdominal pain, and postprandial fullness. Its prevalence is estimated to be 9.6 per 100,000 among men and 37.8 per 100,000 among women. Between 1.5 and 3 million Americans are affected. Related hospitalizations increased by 158 between 1995 and 2004. Evaluation may employ gastric emptying scintigraphy, antroduodenal manometry, and the wireless motility capsule (WMC) and it guides nutritional, medical, and surgical therapies. Constipation is common, occurring in 15 to 20 of the population. It is defined as fewer than two bowel movements per week, or a decrease in a person's normal frequency accompanied by straining, difficulty defecating, or passage of hard stools. Patients with slow transit constipation often have severe symptoms, with prolonged intervals between bowel movements, and may be refractory to standard therapies. Prevalence of slow-transit constipation is 0.030. 17. For patients with refractory symptoms, colonic physiology testing may include radiopaque markers (ROM), colonic scintigraphy, manometry, and the WMC. The WMC is a new modality for diagnosing gastric and colonic motility disorders. The Johns Hopkins Evidence-based Practice Center recently completed an Agency for Healthcare Research and Quality-funded systematic review of the effectiveness of WMC compared with other tests of gastric and colonic motility. We also sought to define populations that would benefit most from motility testing. Overall, the strength of evidence regarding the ability of WMC to detect gastroparesis or slow-transit constipation was graded as low. The main limitations were inconsistencies in reporting the performance of motility testing modalities. Great variability existed in administering diagnostic tests and in assessing those tests. No uniform standards define differences in diagnostic accuracy,...

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