

UOA MS

ES Felekouras MD

61 B Laskou St.
Athens 15669
2106561718

Patient Name:

Special Instructions:

Follow Up:

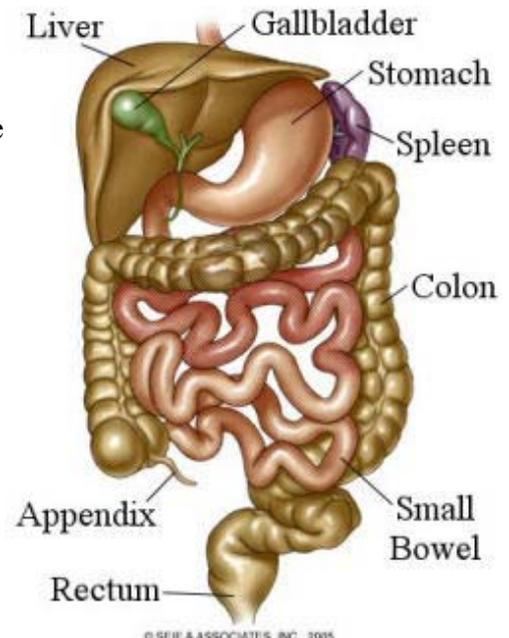
Small Bowel Obstruction

A small bowel obstruction is a blockage (*obstruction*) of the small intestine (*small bowel*). The small bowel is a long, slender tube that connects the stomach to the colon. Its job is to absorb nutrients from the fluids and foods you consume into the bloodstream.

CAUSES

There are many causes of intestinal blockage. The most common ones include:

- Hernias. This is a more common cause in children than adults.
- Inflammatory bowel disease (enteritis and colitis).
- Twisting of the bowel (*volvulus*).
- Tumors.
- Scar tissue (*adhesions*) from previous surgery or radiation treatment.
- Recent surgery. This may cause an acute small bowel obstruction called an ileus.



SYMPTOMS

- Abdominal pain. This may be dull cramps or sharp pain. It may occur in one area or may be present in the entire abdomen. Pain can range from mild to severe, depending on the degree of obstruction.
- Nausea and vomiting. Vomit may be greenish or yellow bile color.
- Distended or swollen stomach. Abdominal bloating is a common symptom.
- Constipation.
- Lack of passing gas.
- Frequent belching.
- Diarrhea. This may occur if runny stool is able to leak around the obstruction.

DIAGNOSIS

Your caregiver can usually diagnose small bowel obstruction by taking a history, doing a physical exam, and taking X-rays. If the cause is unclear, a CT scan (*computerized tomography*) of your abdomen and pelvis may be needed.

TREATMENT

Treatment of the blockage depends on the cause and how bad the problem is.

- Sometimes, the obstruction improves with bed rest and intravenous (IV) fluids.
- Resting the bowel is very important. This means following a simple diet. Sometimes, a clear liquid diet may be required for several days.
- Sometimes, a small tube (*nasogastric tube*) is placed into the stomach to decompress the bowel. When the bowel is blocked, it usually swells up like a balloon filled with air and fluids. Decompression means that the air and fluids are removed by suction through that tube. This can help with pain, discomfort, and nausea. It can also help the obstruction resolve faster.
- Surgery may be required if other treatments do not work. Bowel obstruction from a hernia may require early surgery and can be an emergency procedure. Adhesions that cause frequent or severe obstructions may also require surgery.

HOME CARE INSTRUCTIONS

If your bowel obstruction is only partial or incomplete, you may be allowed to go home.

- Get plenty of rest.
- Follow your diet as directed by your caregiver.
- Only consume clear liquids until your condition improves.
- Avoid solid foods as instructed.

SEEK IMMEDIATE MEDICAL CARE IF:

- You have increased pain or cramping.
- You vomit blood.
- You have uncontrolled vomiting or nausea.
- You cannot drink fluids due to vomiting or pain.
- You develop confusion.
- You begin feeling very dry or thirsty (*dehydrated*).
- You have severe bloating.
- You have chills.
- You have a fever.
- You feel extremely weak or you faint.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

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