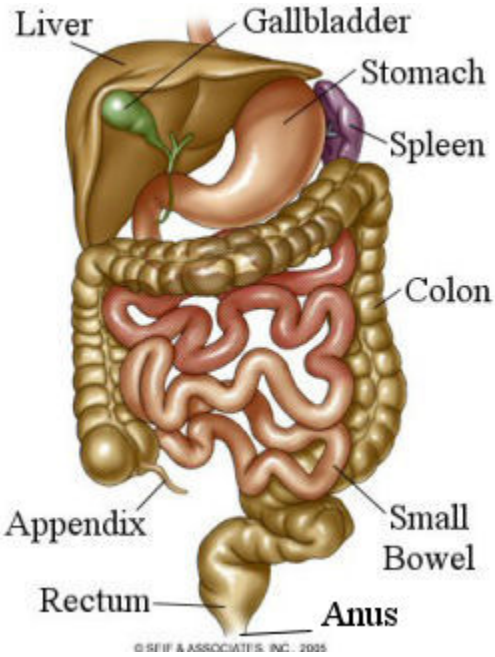
Intestinal Obstruction

An intestinal obstruction comes from a physical blockage in the bowel. Different problems in the bowel may cause these blockages.



SYMPTOMS

Symptoms of bowel obstruction may result in your belly getting bigger (*bloating*), nausea, vomiting, explosive diarrhea, explosive stool. You may not be able to hear your normal bowel sounds (such as "growling in your stomach"). You may also stop having bowel movements or passing gas.

CAUSES

- Adhesions from previous surgeries
- Cancer or tumor
- A hernia, which is a condition in which a portion of the bowel bulges out through an opening or weakness in the *abdomen* (belly). This sometimes squeezes the bowel.
- A swallowed object.
- Blockage (*impaction*) with worms is common in third world countries.
- A twisting of the bowel or telescoping of a portion of the bowel into another portion (*intussusceptions*)
- Anything that stops food from going through from the stomach to the anus.

DIAGNOSIS

Usually this condition is diagnosed with a history and an examination. Often, lab studies (blood work) and x-rays may be used to find the cause.

TREATMENT

The main treatment of this condition is to rest the *intestine* (gut). Often times the obstruction may relieve itself and allow the gut to start working again. Think of the gut like a balloon that is blown up (filled with trapped food and water) which has squeezed into a hole or area which it cannot get through.

- If the obstruction is complete, an NG tube (nasogastric) is passed through the nose and into the stomach. It is then connected to suction to keep the stomach emptied out. This also helps treat the nausea and vomiting.
- If there is an imbalance in the electrolytes, they are corrected with intravenous fluids. These have the proper chemicals in them to correct the problem.
- If the reason for the *obstruction* (blockage) does not get better with *conservative* (non-surgical) treatment, surgery may be necessary. Sometimes, surgery is done immediately if your surgeon knows that the problem is not going to get better with conservative treatment.

PROGNOSIS

Depending on what the problem is, most of these problems can be treated by your caregivers with good results. Your surgeon will discuss the best course of action to take, with you or your loved ones.

FOLLOWING SURGERY

Seek immediate medical attention if you have:

- Increasing abdominal pain, repeated vomiting, dehydration or fainting.
- Severe weakness, chest pain or back pain.
- Blood in your vomit, stool or you have tarry stool.

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