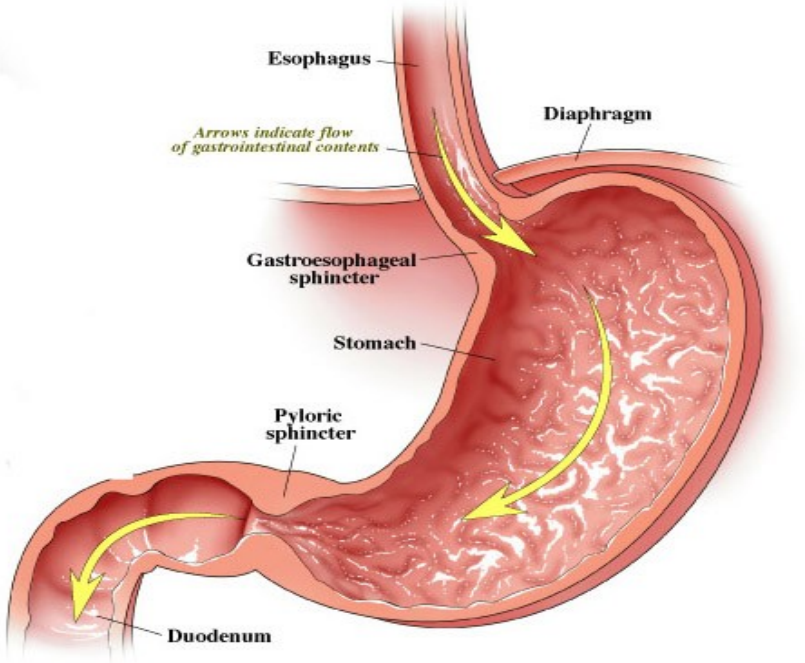
Pyloric Stenosis

Pyloric stenosis is a fairly common condition during the first two months of life. It requires surgery. Pyloric stenosis means that the opening (*pylorus*) out of the stomach is narrowed (*stenosis*). The narrowing is caused by an increase in the muscles of the pylorus. This increase in muscle results in a narrowing. This blocks food from passing out of the stomach into the small bowel. It is slightly more common in boys.



SIGNS AND SYMPTOMS OF PYLORIC STENOSIS

The signs of pyloric stenosis are usually vomiting in the first two to four weeks of life. This becomes more forceful over time (*projectile vomiting*). The vomitus is not greenish or bile stained in color. As the blockage becomes more severe, there is weight loss.

DIAGNOSIS

Your caregiver can often make the *diagnosis* (learning what is wrong) with a good history and physical exam. Their first impression is often proven with an ultrasound of the *abdomen* (belly). Sometimes an x-ray study using contrast material is done. Contrast material is something given the baby by mouth. It outlines the inside of the stomach and small bowel on the x-ray. This shows the narrowing of the channel between the stomach and the small bowel.

TREATMENT

The treatment for this condition is surgery. It is called a pyloromyotomy. The procedure splits the little muscle that surrounds the pylorus. This allows the food to get out of the stomach. This procedure is done after the baby's fluids and *electrolyte* (salts in the blood) are stable and the baby is doing well. The operation typically takes 30-60 minutes. Usually the baby will be able to take formula within one to two days. Rapid recovery is usual. Once treated, the problem does not recur.

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