

## Children's Services

# Pyloric Stenosis: Parent information

### What is pyloric stenosis?

Pyloric stenosis is a condition that can affect babies in the first months of life. Pyloric stenosis is a narrowing ('stenosis') of the exit from the stomach. The narrowing is caused by a thickening of the muscle. Food is therefore prevented from leaving the stomach by the normal route and so the baby vomits. The vomiting may be forceful ('projectile'). Your baby may want to feed after vomiting and may not appear unwell at first. However, as your baby continues to vomit, your baby can become dehydrated, with less wet nappies than usual, and may become lethargic.

### How is pyloric stenosis diagnosed?

- The doctor will want to examine your baby which will include feeling your baby's stomach. This examination is sometimes easier whilst your baby is feeding (this is called a 'test feed'). During the examination the doctor is feeling for a thickened muscle which feels like a small hard lump.
- Some babies will need to have an ultrasound scan which is similar to the scan that pregnant mothers have.
- Blood tests will also be needed.

### How is pyloric stenosis treated?

Your baby will need to have an operation which will be performed by a surgeon who specialises in small babies.

Before the operation can take place your baby's dehydration will need to be resolved. Your baby will therefore have a 'drip' and be given fluids into a vein. These fluids will provide your baby with all the sugars and salts needed to keep your baby well. The amount of dehydration will be measured by regular blood tests being taken. To ensure the operation is safe for your baby, it will only take place once your baby's blood tests are all normal. In some cases this may take a few days.

To prevent your baby from having continued vomiting (which would prevent blood tests returning to normal) your baby's stomach must be kept empty. Your baby will therefore not be allowed to feed before the operation. A tube will also be passed through your baby's nose into his/her stomach (called a nasogastric or NG tube). This tube allows all the secretions produced in the stomach to be removed.

### The operation

The operation needed to correct pyloric stenosis is called a 'pyloromyotomy.' During the operation the surgeon will 'split' the muscle at the bottom end of the stomach by making a cut into it. This widens the exit from the stomach to allow food to pass through.

The muscle can be accessed either by a small incision (cut) being made near the baby's umbilicus (belly button) or by laparoscopic ('key hole') techniques. Your surgeon will talk to you about which approach is planned for your baby.

The wound will be closed with dissolvable stitches under the skin so after the operation only a small scratch is seen. There may also be paper strips called 'steri strips' applied.

You will be able to accompany your baby to the operating department and be with him/her in the recovery room after the operation until they are able to return to the ward.

### **After the operation**

Many babies still vomit for a while after the operation and when they start feeding again but this usually settles gradually over a few days/weeks. As the vomits are usually only small, your baby will not need to stay in hospital for all this time but will need to stay, and still have a drip, until they are taking enough feeds to keep hydrated. This is usually one to three days after the operation.

Your baby will be able to have pain killing medicine to reduce any soreness after the operation.

### **Discharge advice**

- It is important to keep the wound clean and dry. Nappies should be changed as soon as they are wet. Your baby can have sponge washes but no baths for five days. This is to prevent infection.
- It is important to observe the wound for signs of infection (for example redness, swelling, fever). If any signs of infection are noticed you should contact your GP.
- It may be necessary to continue to give your baby some pain killing medicine at home and your nurse will discuss this with you.
- Your health visitor will have been made aware of your baby's admission and diagnosis. It is important that your baby is weighed weekly for at least 6 weeks as he/she will have lost some weight through having pyloric stenosis. However, within six weeks, most babies will have regained this.
- A clinic appointment will be made for approximately six to eight weeks after discharge to check that your baby has progressed without complications and the wound has healed satisfactorily.

If you have any further questions please do not hesitate to ask the staff looking after you and your baby. We will be happy to help.

### **Contact Numbers:**

Ward:.....

Nurse Specialist:.....



We are currently working towards a smoke free site. Smoking is only permitted in the designated smoking areas.

For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169

### Help with this leaflet:



If you would like this information in another language, large print or audio format, please ask the department to contact Patient Information: 01223 216032 or [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Polish

Jeżeli chciałbyś uzyskać te informacje w innym języku, w dużej czcionce lub w formacie audio, poproś pracownika oddziału o kontakt z biurem Informacji Pacjenta (Patient Information) pod numerem telefonu: 01223 216032 lub pod adresem [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Portuguese

Se precisar desta informação noutra língua, em impressão de letras grandes ou formato áudio, por favor peça ao departamento que contacte a secção de Informação aos Doentes (Patient Information) pelo telefone 01223 216032 ou através do e-mail [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Arabic

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### Cantonese

如您需以另一語言版本、特大字體或錄音形式索取本資料，請要求部門聯絡病人諮詢服務：電話 01223 216032，電郵地址 [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Turkish

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### Urdu

اگر آپ کو یہ معلومات کسی دیگر زبان میں، بڑے الفاظ میں یا آڈیو طریقہ سے درکار ہوں تو برائے مہربانی اس شعبہ سے پیشینٹ انفارمیشن سے ذیل کے ذریعہ رابطہ کرنے کی درخواست کریں: 01223 216032 یا [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Bengali

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### Document history

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