



Large Bowel Obstruction

What is a large bowel obstruction?

A large bowel obstruction is a blockage in the large intestine, or colon. The blockage makes it hard for the contents of the intestine to pass through and out of the body. An object in the intestine or a problem with the intestinal muscle itself can cause a block.

How does it occur?

The contents of the bowel are pushed along by the intestinal muscle. When part of this muscle stops working, the contents of the intestine stop moving and form a blockage. Other common causes of obstruction are tumors, inflammation, and twisting of the colon.

What are the symptoms?

The symptoms include:

- a change in bowel habits (little or no stool)
- blood in stool
- weight loss
- abdominal pain
- swelling of the abdomen
- chills or fever
- vomiting
- nausea
- belching.
- If the obstruction is only partly blocking the intestine, there may be temporary relief when liquid stool or gas passes out of the body.



How is it diagnosed?

Your health care provider can usually tell if you have a large bowel obstruction from your symptoms, medical history, and results of your physical exam. However, you may have the following tests to confirm the diagnosis:

- Blood work
- Urine test
- Test of stool for blood
- Colonoscopy, in which the doctor inserts a flexible tube through the anus to look at the Colon
- X-rays of the bowel following a barium enema
- Chest x-rays.

How is it treated?

Your health care provider will give you fluid through a vein in your arm (IV) to keep your body's fluid balance normal. An x-ray of your large intestine will probably be taken. You will probably have a tube inserted through your nose or throat and down into your intestine to drain the fluid and gas trapped behind the blockage. Sometimes a tube inserted up the rectum can relieve bowel gas and obstruction. You may be given antibiotics, as well as other medications.

You may need to have surgery to learn the type and cause of the blockage. If the blockage is some type of object trapped in the intestine (for example, stool or a gallstone), your surgeon will remove it from the large intestine. If the obstruction is caused by cancer, your surgeon will remove part of the colon.

If the obstruction is caused by a twist in the intestine or from a buildup of scar tissue from a previous condition, you may need surgery. Your surgeon will remove the part of the intestine with the scar tissue or twist and rejoin the ends of the intestine.



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Rarely, depending on the cause of the obstruction, a temporary or permanent colostomy may be necessary. A colostomy is a surgical procedure in which the surgeon makes an artificial anus in the abdominal wall.

How long will the effects last?

The symptoms will last as long as the obstruction remains. If the obstruction is not treated, it can become a life-threatening medical emergency.

What can be done to help prevent a large bowel obstruction?

If there is a change in bowel habits, call your health care provider and discuss these changes.

Eat a diet high in fiber and low in fat, cholesterol, and nitrites (a compound found in hotdogs and some processed meats). Drinking plenty of water helps your intestines to function normally.

Some believe that a diet with very little red meat may help to prevent colon cancer. If you are not used to high-fiber diets, begin slowly.

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