

Colonic stent insertion



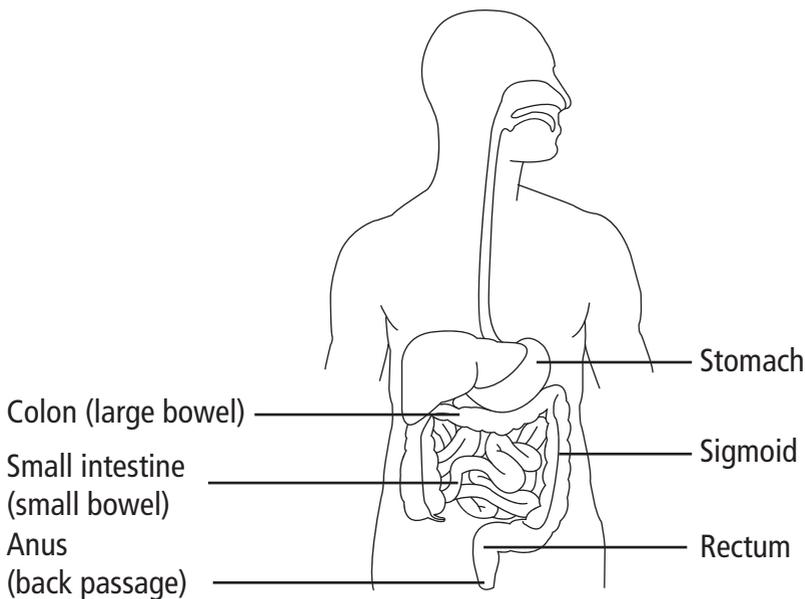
Who is this leaflet for?

This leaflet is for patients who have a bowel blockage it provides information about a procedure called a colonic stent insertion, and explains what is involved and any potential risks. It is does not replace informed discussion between you and your doctor.

To understand more about this procedure it may help to know how your digestive system works.

When food is eaten it passes from your mouth to your oesophagus (gullet) and into your stomach. It then breaks down and becomes semi-liquid. This semi-liquid food continues through your small intestine (small bowel), which is a long coiled tube where nutrients are digested and absorbed. It is then passed into your colon (large bowel), which is a wider, shorter tube, where it becomes faeces (waste material). The main job of your colon is to absorb water into your body and make the faeces more solid. Your faeces then enter your rectum (back passage). When your rectum is full, you get the feeling that you want to open your bowels. The waste is finally passed through your anus into the toilet.

The digestive system



What is a colonic stent?

A colonic stent is a hollow tube made of flexible alloy mesh that can be rolled up tightly and inserted through a blockage. Once in place the stent will expand and open a passage through the blockage.

Why do I need a stent?

To relieve your bowel blockage. This will allow your bowel to empty and return to its normal size.

Is there an alternative?

The alternative to a stent insertion is to have an operation to either by-pass or remove the blockage. However, this is not always possible.

What are the benefits of a colonic stent?

If your blockage can be removed with surgery, a stent will relieve it until you have your operation. This will allow your bowel to empty and return to normal size. You will feel much better and your operation will be safer.

If your blockage cannot be removed with surgery, or where surgery may not be the best option for you, a stent will relieve the blockage, allowing your bowel to empty and return to normal size. You will then feel a lot better and should be able to go home.

Who will perform my procedure?

A radiologist and another doctor or endoscopist will perform a colonoscopy (camera test to look inside the bowel). Both have expertise in performing this procedure. A team of radiographers and nurses will assist them.

Where will it take place?

In a special X-ray room in the Newlyn Unit.

How do I prepare for it?

You may already be in hospital, if not you will need to be admitted as an inpatient.

Before you attend

Please let us know if you are taking any antiplatelet medicines (for example, Aspirin, Clopidogrel, Prasugrel, Ticagrelor) or any medicines that thin the blood (for example, Warfarin, Rivaroxaban, Apixaban, Dabigatran), as these may need to be withheld temporarily before the procedure. If you need advice, then please call the Interventional Radiology department as soon as you get your appointment letter on 01872 252290.

Please bring a list of your normal medications into the hospital for the appointment.

On the day of your procedure:

- you will have a cannula (small plastic tube) inserted into a vein in your arm so that you can be given medication during the procedure
- you may have some routine blood tests
- you will not be able to eat or drink for at least eight hours before the procedure
- you will be given an enema to clean your bowel. This will involve having a small tube inserted into your rectum (back passage) through which a small amount of fluid will be inserted.

What will happen during my procedure?

You will be taken to the X-ray theatre on your bed and transferred to an X-ray table.

You will meet the team performing your procedure. They will discuss everything with you and you will have the opportunity to ask questions.

You will be asked to lie on your left hand side and will be given a sedative and some pain killing medication through the cannula. A monitoring device will be attached to your chest, around your arm and on your finger. You may also be given oxygen through a small tube in your nose.

A colonoscopy will be performed. This involves placing a flexible camera into your bowel so that we can see the blockage clearly.

The radiologist will insert a long wire through the colonoscope (flexible camera). The stent is then fed over the wire and inserted into the blockage. X-rays are used to ensure that the stent is in the correct place. It is then released and expands opening the blockage.

Will it hurt?

You may have some discomfort during the procedure, but this should be controlled with painkillers and sedatives.

You will be awake throughout the procedure and able to tell the nurse looking after you how you are feeling.

How long will it take?

As a guide, expect to be in the X-ray theatre for at least an hour.

What happens next?

Once the blockage has been opened you can expect frequent bowel movements that will begin almost immediately. These will continue until your bowel has emptied and returned to normal size.

When you get back to the ward your nurse will arrange for you to be near a toilet or commode. Routine observations, such as taking your blood pressure and pulse, will be carried out at regular intervals to make sure that everything is OK.

Are there any risks or complications?

This is usually a safe procedure, however there are small risks such as:

- a perforation (making a small hole) in your bowel wall. If this happens you may need an operation to repair it
- a small amount of bleeding may occur as the stent expands the blockage
- you may experience some pain as your bowel returns to normal
- after a time the stent could become loose and it may move. If this happens the stent may be removed, replaced or it may just be necessary to monitor you.

Will my diet be affected?

You will need to follow a special diet for the first few days after your procedure. This will help your bowel return to normal and make sure it doesn't become blocked again.

What happens when I go home?

When you go home you will be given two leaflets:

1. Following colonic stent insertion.
Providing important information about what to do if you are worried about your stent.
2. A guide to good nutrition after a colonic stent placement.
Providing dietary advice.

Contact us

Colorectal Clinical Nurse Specialists:

Clare Ferris
Chrissie Bevins
Helen Brownson

Tel: 01872 252693 (answerphone if unavailable)

OR

Tel: 01872 250000 (ask switchboard to page)

If you have any questions or need any further information, please contact either Clinical Imaging Department 01872 252348 or Interventional Radiology on 01872 253962.

If you would like this leaflet in large print, braille, audio version or in another language, please contact the General Office on 01872 252690

