Radiology Department

Small bowel enema examination
Information for patients
The X-ray department has received a request for you to have a Small bowel enema examination. This leaflet tells you the purpose of the examination, what’s involved and what the risks are. We will also send you an appointment letter and an information sheet which tells you exactly how you need to prepare for this examination.

• If you cannot attend your appointment, please let us know as soon as possible. Please telephone us on the number on the front of your appointment letter.

• If you are diabetic, please telephone us as soon as possible as we may need to send you additional information about your appointment.

• If you are female and of childbearing age, i.e. up to 55 years old, we will ask you to complete a form asking about the dates of your periods. (You may already have done this.) This is because the examination should usually only be performed when we can be sure that you are not pregnant. Please complete and return this form as soon as possible so that we can give you an appropriate appointment date.

• If you weigh more than 146 kg or 23 stone, please tell us immediately.

• If you need hospital transport to reach the hospital, please tell us as soon as possible.
What is a small bowel enema examination?

This is an X-ray test to examine the middle part of the intestine called the small bowel. This is always a difficult area to examine because it is not usually possible to get a camera to this area. A way to see this part of the bowel is to pump white chalky liquid called barium directly into it and take X-ray pictures. We do this by passing a fine tube through your nose, down the gullet, through the stomach and into the small bowel.

The purpose of the test is to try to find out what may be causing your symptoms (e.g. stomach pain, weight loss).

Can I bring a relative or friend?

Yes, but for reasons of safety they will not be able to accompany you into the X-ray room except in very special circumstances.

Are there any risks?

- Exposure to radiation: This is a low dose examination and the amount of radiation is kept to a minimum. This is equivalent to the amount of background radiation that you naturally receive over 12-15 months.

- Occasionally, we are unable to get the tube around to the small bowel. In this case, we may ask you to drink the barium instead. This is generally much slower.

Your doctor has recommended this examination because he/she feels that the benefits are greater than the risk of not having the examination. Even so, this test cannot be guaranteed to detect all abnormalities in the small bowel.
What happens at home before the examination?

In order for the doctor to see the small bowel clearly, it must be empty. To do this we will ask you to follow a special diet the day before the test. In some cases you will also be asked to take a mild laxative. This should have the effect of making you empty your bowels frequently.

- The laxative may dehydrate you so drink plenty of fluids. This should prevent you from getting a headache or feeling dizzy.
- We will give you a special diet sheet for the day before the test. This is enclosed with your appointment letter.

**Please stop taking medications which are designed to make you less constipated (e.g. Fybogel) two days before the test.** All other medication can be taken as normal up to the night before your appointment.

**Please have no food, drink or tablets for 6 hours before the time of your appointment.** Your tablets can be brought with you to take as soon as your examination is completed.
What happens during the examination?

The procedure usually lasts about an hour but can last up to four hours.

You will be asked to change into a hospital gown to make sure that no metal coins/objects or bra straps are seen on the pictures. If you need to go to the toilet you should do this before the test begins.

We will place some local anaesthetic jelly into your nose and then introduce a small plastic tube through your nose, asking you to swallow it so that it goes down your gullet. Then, using the X-ray machine, we will guide this tube through the stomach and into the small bowel. Once the tube is in the correct position, we will pump in the barium to show up the small bowel. We will then take pictures over a period of time which we can see on a screen.

We will press on your tummy during the test to spread the bowel loops apart. You may feel a little cold due to the large amount of liquid running into your bowel so we will give you blankets. We need to make sure that we see the very last point of the small bowel. Usually this happens after one hour. If it doesn’t, we may ask you to sit outside the room and from time to time we will call you back to see how things are progressing.
Side effects and what happens after the examination?

As we have put a large amount of liquid into your small bowel this may pass through quickly into your large bowel and give you diarrhoea.

- We advise you to stay close to a toilet for a while. It is often a good idea to have a cup of tea and a bun in the League of Friends while you are waiting for the liquid to come through so that you do not get caught short in the car!

- **Drink plenty of fluids (several extra glasses of water each day to quench thirst).** The barium will make your motions whitish for the next few days. Keep drinking extra fluids until your stools are no longer whiter than your normal. It is important to wash away the barium inside your bowel so that it does not harden inside you and cause constipation or even block the toilet!

- Eating a high fibre diet like bran or wholemeal bread can help, but the main thing is to drink plenty.

- If you have problems with your heart or water retention, you may not be able to drink this much safely. If you are in any doubt, or you find you become breathless or your legs swell up, contact your GP.
When and how will I know the result of the examination?

The pictures of your small bowel will be examined by the radiologist, who will then send a report of the results to the person who referred you.

• If your GP referred you, the report is sent to him or her and you can make an appointment to see them 10 days later.

• If a doctor/consultant from the outpatient department referred you then the result will be sent out in time for your next outpatient appointment. If you do not yet have another outpatient appointment and do not hear anything within three weeks, you should telephone the consultant’s secretary for advice.

Questions or concerns

If you have any questions you can telephone us on the number on the front of your appointment letter.

Further information

Further information can be found on the following websites:
www.rcr.ac.uk (Royal College of Radiologists)
www.oxfordradcliffe.nhs.uk/forpatients/departments/departments.aspx
www.nhsdirect.nhs.uk
If you need an interpreter or need a document in another language, large print, Braille or audio version, please call 01865 221473. When we receive your call we may transfer you to an interpreter. This can take some time, so please be patient.