

Radiology Department

CT Enteroclysis examination

Information for patients



This leaflet explains CT Enteroclysis, what is involved and the risks. Details of what you need to do to prepare for this examination are included in another diet leaflet, which is enclosed. Please read it carefully.

If you are a diabetic, asthmatic, have any specific allergies, or are unable to drink the amount of fluid required for the scan due to heart and / or kidney disease, please tell us, as we may need to send you further information.

For women between the ages of 12 - 55 years it is important to carry out this examination within 10 days of the start of your menstrual cycle (period). This is because the examination should usually only be performed when we can be sure that you are not pregnant. If the appointment date does not fall within this time please telephone for another appointment.

What is a CT Enteroclysis examination?

It is a specialised examination of the middle part of your intestine called the small bowel. It involves a CT scan after filling your small bowel with fluid. The purpose of the test is to try to find out what may be causing your symptoms (e.g. abdominal pain, weight loss).

Can I bring a relative or friend?

Yes, but for reasons of safety they will not be able to come with you into the CT scan room. Please be aware that there is limited seating in the waiting area so during busy periods accompanying visitors may be asked to return for relatives/friends later.

What happens at home before the examination?

In order to see the small bowel clearly, it must be empty. On the day before the examination we will ask you to follow a special diet (please read the separate diet leaflet enclosed).

You will need to drink fluid as instructed. This should help prevent headaches or dizziness caused by dehydration.

- If you take any drugs that cause constipation, you should stop taking these 4 days before the examination. If in doubt, ask your GP.
- If you are taking iron tablets you should stop taking them 7 days before the examination because they also cause constipation.
- Please continue to take all your other medications as normal.

What happens during the examination?

When you arrive in the radiology department you will be greeted by the reception staff and radiology assistants.

A small tube called a venflon will be placed in one of the veins in your arm. This is used to give you an X-ray dye during the CT scan.

A radiologist or advanced practitioner will carry out the examination. Some local anaesthetic jelly will be placed in your nose to make it numb, followed by a small plastic tube. You will be asked to swallow several times so that the tube passes down from your mouth into your stomach.

Once the tube is in the correct position, you will be transferred to the CT room, where a laxative liquid will be run through the tube. You will then have a CT scan of your abdomen.

You should only be in the CT scan room for around 30-40 minutes. The whole procedure usually takes 2 hours but may be longer if we have unscheduled emergency patients. We will keep you informed of any delays.

What is a CT scan?

A CT scanner is an open, ring-shaped machine which uses X-rays to take detailed pictures in 'thin slice sections'. You will be asked to lie on the scanning table on your back. The table will travel slowly forwards and backwards through the scanner several times and pictures of your abdomen will be taken. You will be given an injection of X-ray dye (contrast) into a vein in your arm. This allows your abdominal organs and bowel to be seen clearly. The cannula (venflon tube) through which the contrast is injected is the one placed in a vein in your arm in the preparation area before you are taken in to the scan room.

We will ask you about any medical history of diabetes, asthma or kidney problems.

During the injection you may experience a metallic taste in the mouth and a warm sensation throughout your body which lasts for about 30 seconds. You will be asked to tell the scanning staff if you feel any discomfort in your arm during the scan.

You will also be given an injection of Buscopan to relax your bowel and make the examination more comfortable. We will ask you about any previous history of heart problems or allergy to Buscopan before we give you the drug.

Once the scan is completed the tube in your nose and venflon tube in your arm will be removed, and you will be able to go home.

Are there any risks?

- There is minimal exposure to radiation. This is approximately the same as the amount of radiation you normally receive over three years. We are all exposed to background radiation from the environment every day of our lives. This is normal and natural. Medical x rays give an additional dose and the level varies with each examination. The amount of radiation is kept to a minimum by radiation dose controls on the scanner.
- Rarely, some people have an allergic reaction to the contrast injection. Please tell the staff if you have had a previous allergic reaction to iodine or a contrast dye.
- Very rarely the contrast may cause some kidney damage in people who already have kidney problems.
- Rarely, for those who have an injection, the contrast can leak outside the vein to cause temporary swelling and discomfort in the arm. This is unlikely to happen but if it does we will give you further instructions and advice.

Your doctor has recommended this examination because he/she feels that the benefits of the procedure outweigh the risks of having the examination.

Side effects and what happens after the examination?

- The large amount of liquid which has been put into your small bowel will pass through quickly into your large bowel and give you diarrhoea but this will not last long.
- Drink plenty of fluids (several glasses of water) after the examination to quench thirst. If you have heart or kidney disease it may not be safe for you to drink this much . If in doubt or you find you become breathless or your legs swell up, contact your GP. If your GP is closed please contact your local Accident and Emergency department.
- The Buscopan injection may blur your eyesight over the next few hours. Do not drive or operate dangerous machinery until you are sure your vision has returned to normal.

In the rare event that, following the CT Enteroclysis and Buscopan injection, you develop a red eye and painful blurred vision in one or both eyes you must attend the Emergency Department immediately for assessment. Please bring this leaflet with you.

- If you have a stoma please bring a spare bag to the appointment. Please make the staff aware that you have a stoma as this may mean that we need to adjust the volume of fluid that will be pumped through the nasal tube.
- You may feel bloated after the examination but this should settle.
- You can resume your normal diet as quickly as possible.
- If you are a diabetic taking Metformin we will speak to you about the possible need to stop taking Metformin for 48 hours after the scan.

When and how will I know the result of the examination?

The images of your bowel will be examined by the radiologist, and a report will be sent to the person who referred you.

- If your GP referred you the report will be sent to the GP practice and you can make an appointment for 10 days later to get the results.
- If a doctor/consultant from the outpatient department referred you, the result will be sent out in time for your next outpatient appointment. If you do not have another appointment and do not hear anything within three weeks, you should telephone the consultant's secretary.

Questions /further information

If you have any queries we will be happy to answer them on the day of the appointment or you can telephone us on the number given on your appointment letter.

More patient information is available on the following websites:

www.rcr.ac.uk – Royal College of Radiologists – Information under the patient and carers section

www.goingfora.com – Follow the Radiology signpost for an interactive guide

www.impactscan.org/patientguide.htm – Patient information and guide to CT scanning

<http://www.ouh.nhs.uk/> – Oxford University Hospitals NHS Trust website

www.nhsdirect.nhs.uk – Search for CT Scan for more information

If you need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473** or email **PALSJR@ouh.nhs.uk**

Dr Andrew Slater, Gastrointestinal Consultant Radiologist
Dr Margaret Betts, Gastrointestinal Consultant Radiologist
Ms Helen Nicholl, CT Superintendent Radiographer
Dr Helen Bungay, Consultant Radiologist
Version 4. Created April 2013
Review April 2016
Oxford University Hospitals NHS Trust
Oxford OX3 9DU
<http://www.ouh.nhs.uk/patient-guide/leaflets/default.aspx>