

Pyloric Stenosis. Stenosis means a narrowing in a tube. In this case it means that the “out” tube of your stomach, called the pylorus, is too narrow to let food pass through. *What are the signs of it?* Since the food your baby swallows can’t get out of the stomach to go into the intestines, it goes backwards up the baby’s throat and out its mouth. This usually looks like regular baby spit-up at first, but then it becomes very forceful vomiting of everything the baby eats.

Who gets it? Usually babies less than 2 months of age. It happens to boys more than girls. No one knows why it happens or why it happens more in boys. Some think it runs in families.

How do I know my baby has it? Sometimes we can tell just by the baby’s symptoms. Sometimes we can feel a knot in your baby’s stomach where the problem is. If we cannot tell by your baby’s symptoms or feeling a knot, we will do an ultrasound to measure the pylorus and see how thick it is. An ultrasound is the same test that women get when they are pregnant to look at the baby. It does not hurt and it does not give off radiation.

How do you fix it? The only way to fix it is with surgery. The reason that the food cannot get out of the stomach is because muscle surrounding the “out” tube has become so thick and strong that it collapses the tube. To open the tube we have to cut the muscle. We either do this by bringing the end of the stomach out of the body to cut it (open pyloromyotomy), or by looking into the body with a camera and cutting the end of the stomach inside the body (laparoscopic pyloromyotomy). Both ways work. If the camera is used there is usually a smaller scar. Possible complications of surgery include: bleeding or infection of the incision, allergy to anesthesia, incisional hernia, or stomach perforation.

What do I expect once I get to the hospital? The baby has to stop eating so that he or she can get ready for surgery (it is important for them to have an empty stomach before they are put to sleep). They will have an IV to give them fluids until the time of surgery. If your baby was very dehydrated then he or she may have to get fluids for 24 hours or more before surgery. *The hardest part for parents* is not being able to feed their baby. It is very difficult, but it is also very important. The hospital will provide flavored pacifiers for your baby for comfort, and the IV fluids will prevent them from being thirsty, but they will be very cranky because they are hungry.

What happens after the surgery? After the operation babies begin to eat again within 6 hours. And they usually get to go home from the hospital the next day. Some babies will continue to have regular baby spit-up or reflux, but they should not have the forceful vomiting that they had before. Their surgery scars usually heal within a week, and are almost invisible by the time they are 4-5 years old. The problem rarely comes back, so most vomiting that happens after surgery is caused from something else.

To make an appointment to discuss this topic, please call or email at the information listed below.

East Tennessee Pediatric Surgery Group
2100 Clinch Avenue
Children's Medical Office Building, Suite 430
Knoxville, Tennessee 37916

(865) 546-2131 - Phone
(865) 637-2535 - Fax
Email: info@etpsg.com
Website: www.etpsg.com