

Investigation

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Plain abdominal radiography confirms the presence of large bowel distension. All such cases should be investigated by a subsequent single-contrast water-soluble enema study , CT scan or endoscopic assessment to rule out functional disease. Organic disease requires decompression with either a lapa rotomy or stent. Stomal stenosis can usually be managed at the abdominal wall level. Surgical management after resuscitation depends on the underlying cause and the relevant chapters in this book should be consulted. Functional disease requires colonoscopic decompression in the first instance and conservative management. Intestinal perforation can occur in patients with functional obstruction (see Chapter 73).

Revision #1

Created 2025-12-31 15:28:14 UTC by Omar Ayman

Updated 2025-12-31 15:28:14 UTC by Omar Ayman