Colonic stent insertion: aftercare

You have had a colonic stent placed. This is where we insert a metal tube into the colon at the point of blockage to relieve the obstruction, allowing you to pass stools normally.

This was performed by Dr _____

Date and time: _____

Blood pressure/Pulse on discharge: _____

Clinical condition on discharge: _____

What to expect afterwards

- Rest, take it easy and avoid strenuous activity for the next 24-48 hours. The ward staff will monitor your condition on the ward to make sure the stent is working and there have been no complications.
- You may have pain, bruising and discomfort related to the procedure. This should improve over the next 24-48 hours as your bowels start to work again. Please take painkillers for relief either at home or ask the nursing staff if in hospital.
- You may be prescribed enemas and stool softeners to encourage the bowels to start working again and prevent blockage of the stent. The surgical team will decide on what is necessary.
- Some other problems that may occur:

Problem	How to deal with it?
Bowel perforation (a hole in the bowel wall)	This is a serious potentially life threatening complication which can be a direct result of the stenting procedure or due to the obstruction causing the bowel wall to weaken and breakdown. It may require urgent surgery.
The bowel becomes obstructed again	You will need to have imaging to confirm the cause of this. A plain X-Ray of the abdomen or a CT may be requested by the doctors looking after you. This could be due to blockage of the stent or possibly movement of the stent away from the stricture causing the blockage. A repeat stenting procedure might be possible. The treatment will depend on the underlying cause.

When to seek help

You should contact your GP or come in to hospital when you are discharged from hospital with the stent in place and experience:

- Abnormally severe abdominal pain.
- Symptoms that suggest the bowel is obstructed again, for example no passage of stool, bloating, vomiting or pain which is persistent.

Please bring this information sheet with you if you seek medical attention.

Pain relief

If you have the following painkillers at home, take as follows if it is safe for you to do so:

- Paracetamol – do not take more than 8 tablets in 24 hours (unless you have been advised otherwise e.g. you have a reduced liver function).
- Anti-inflammatory – Ibuprofen, Aspirin, etc. You can take one of these in addition to paracetamol if you have moderate pain (unless you have been advised otherwise e.g. you have a duodenal ulcer).

As healing occurs, you will feel less pain. Once your pain is controlled and is mild, you should only take paracetamol. If your pain remains severe for more than three days or is not relieved by painkillers, you should contact your GP.

When can I resume my normal lifestyle?

This will depend on how unwell you have been due to the bowel obstruction and how soon you recover. You should be able to resume most normal activities of daily living within a few days of your bowels working again.

When can I drive?

If you are discharged from hospital with the stent in place there are no restrictions on driving providing you are pain free and well enough to do so, for example able to perform an emergency stop comfortably. If you were given sedation then you should not drive for the next 24 hours (see separate information sheet).

What happens next?

The doctors looking after you will explain the next step in your care. The plan could be for surgery later or simply managing the bowel obstruction with a stent and avoiding surgery.

Contact us

Radiology Day Case Unit on 0118 322 8368 (Monday-Friday 8.30am-5pm).
Out of hours please attend Royal Berkshire NHS Trust Emergency Department or your nearest Emergency Department.

Further information

For further information about the Trust, visit our website www.royalberkshire.nhs.uk

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