



Barium enema

Your doctor has recommended that you have a barium enema. The reason for this will depend on your condition; your doctor will talk to you about your options.

This leaflet explains the procedure and aims to answer the main questions you're likely to have. If you have any additional questions then please feel free to talk about them with your doctor, nurse or radiographer before the procedure.

What is a barium enema?

A barium enema is a test that uses X-rays to examine the large bowel (colon and rectum). The bowel contains air and so it lets most X-rays pass through easily. This means it doesn't show up well on plain X-ray images. However, if the bowel wall is coated with barium, a white liquid that X-rays don't pass through, the lining of the bowel does show up clearly on X-ray images.

A barium enema can be used to find out more about what is causing symptoms such as:

- constipation or diarrhoea
- blood in your faeces
- abdominal pain
- unexplained weight loss
- anaemia

The test is particularly useful for helping to diagnose conditions that affect the lining of the bowel, including polyps, diverticular disease and cancers of the colon or rectum.

What are the alternatives?

One alternative to a barium enema is a colonoscopy. This test looks directly at the lining of the bowel, using a narrow, flexible, tube-like telescopic camera called a colonoscope.

Alternative imaging procedures include computed tomography (CT) and magnetic resonance imaging (MRI). You may need to have a combination of tests to help make a firm diagnosis.

Preparing for your barium enema

To get good X-ray images, it's essential for your bowel to be completely empty. This allows the barium, which acts like a temporary paint, to coat every part of your bowel lining. If your bowel isn't completely empty then the doctor won't be able to get a clear image of your colon and you may need to have the test again.

It is important to follow the instructions on the bowel preparation and diet sheet that you have been given. Please read the laxative information leaflet a few days before your appointment. You should contact us for advice if you have any of the conditions described in the leaflet, as we may need to prescribe a different laxative for you to take.

If you have diabetes, contact us in advance as preparation for the test involves not eating solid food the day before. If your diabetes is controlled by your diet, please book a morning appointment. If you take tablets or insulin for your diabetes, contact us for more advice.

If you usually take medication (for example, tablets for blood pressure), continue to take these as prescribed unless your doctor specifically tells you not to. If you are unsure about your medication, contact your doctor.

Please tell the doctor or radiographer:

- about any medicines you're taking
- if you have any allergies, glaucoma or heart disease
- if you are, or think you could be, pregnant - a barium enema isn't recommended for pregnant women, unless there is an urgent medical reason

Before your test you will be shown to a private cubicle where you can remove your clothes and put on a hospital gown. You will then be taken to the X-ray room and asked to lie down on the X-ray table.

About the procedure

The procedure will usually be carried out by a radiographer (a health professional trained to perform imaging procedures). A radiologist (a doctor who specialises in using imaging methods to diagnose medical conditions) may also be present. Your radiographer will explain the procedure and make sure that you're happy to go ahead with the test.

You may be given an injection of a muscle relaxant into your arm. This helps to relax the muscles of your bowel wall and make the examination more comfortable. You may be given this muscle relaxant at the start of the procedure, or if your bowel spasms during the examination.

A soft, plastic tube will be passed into your rectum (back passage). Then the warm barium liquid will pass through the tube into your bowel. Air or carbon dioxide gas will also be gently pumped through the tube to expand the bowel and make the bowel wall easier to see. You may find this slightly uncomfortable but it won't last for long. You may feel as if you want to go to the toilet but it's important to try and hold the barium fluid and air in.

Images of your bowel will be displayed on a TV screen and you will be moved into different positions. This helps the barium to flow around your bowel and allows your radiographer or radiologist to see as much of the bowel as possible. The X-ray table will slowly tilt to get you into position. Several X-ray images, or a moving series of images, will be taken with you in different positions.

When the radiographer or radiologist has enough images, the tube will be removed. You may have cramp-like pains for a short while after your barium enema.

The test usually takes 15 to 20 minutes, but altogether you will be in the radiology department for approximately 30 to 45 minutes.

What to expect afterwards

After your procedure, you will probably want to go to the toilet. When you feel ready, you can go home.

If you were given muscle relaxants, you should wait an hour before driving. It is best to arrange for someone to drive you home.

When you get home, it's important to rest. You may also want to stay within reach of a toilet for the first few hours.

Try to drink clear fluids - enough to stop you getting thirsty - and eat vegetables, fruit and high-fibre foods. This helps to maintain regular bowel movement and prevent you becoming constipated. You may find that your stools are white because of the barium. This should only last for a few days.

Getting your results

A report will be sent to the doctor who requested your test. This can take several days. He or she will discuss the results with you at your next appointment.

What are the risks?

Barium enemas are commonly performed and generally safe. However, in order to make an informed decision and give your consent, you need to be aware of the possible side-effects and the risk of complications for this procedure.

You will be exposed to some X-ray radiation but the amount you receive isn't considered to be harmful. The level of exposure will depend on the procedure. Talk to your doctor or radiologist for more information.

Pregnant women are advised not to have X-rays as there's a risk the radiation may harm the unborn baby. If you are, or could be, pregnant then please tell your doctor or radiographer.

Side-effects

After having a barium enema you may feel bloated for a short while. You may also be constipated for a few days and need to take a mild laxative. You can buy these over the counter at a pharmacy. Always read the patient information leaflet that comes with your medicine and if you have any questions, ask your pharmacist for advice.

The muscle relaxant that is used for a barium enema can temporarily blur your eyesight, give you a dry mouth and make it harder than usual to pass urine. These effects usually wear off after about 15 to 30 minutes.

Complications

Complications are rare but it's possible that you could have a reaction to the bowel cleansing preparation. This can make you dehydrated and may cause you to lose too many salts (electrolytes) from your body. If this isn't treated it can cause you to collapse or have a fit.

During the test, there is a very small chance that your bowel may be damaged or perforated. For this reason, you won't be offered a barium enema if you already have an inflamed or weakened bowel wall.

Ask your doctor to explain how these risks apply to you. The exact risks will differ for each person.

Contact

If you have any questions or need further information, please contact the Diagnostic Imaging reception:

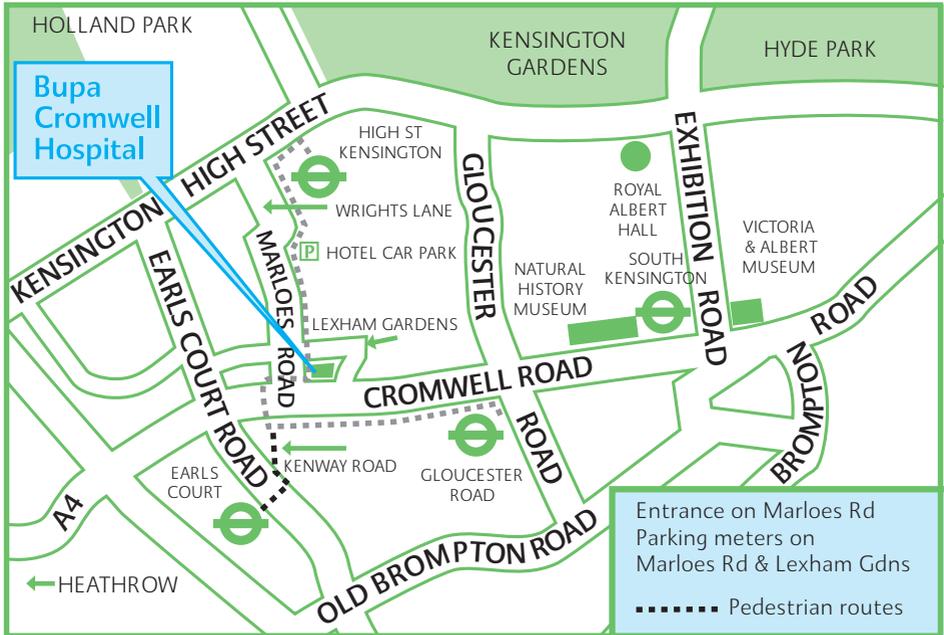
Tel: 020 7460 5746/7

Fax: 020 7835 2496

The department is open from 8.00am to 8.00pm, Monday to Friday and 9.00am to 2.00pm on Saturday.

Please be punctual for your appointment. If you cannot keep your appointment then contact us immediately.

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Bupa Cromwell Hospital
Cromwell Road
London SW5 0TU

T: +44 (0)20 7460 2000 (hospital switchboard)

F: +44 (0)20 7835 2444

E: info@cromwellhospital.com

W: www.cromwellhospital.com