

UKINETS Bitesize Guidance for the Nutritional Management of Bowel Obstruction

Patients should be screened for malnutrition using a validated nutrition risk screening tool e.g. MUST, SGA, NRS-2002. Patients at risk should be referred to a dietitian. Specialist dietitian or clinical nurse specialist input is recommended alongside this.

Causes

Desmoplasia and intestinal primary NETs can cause bowel obstructions.

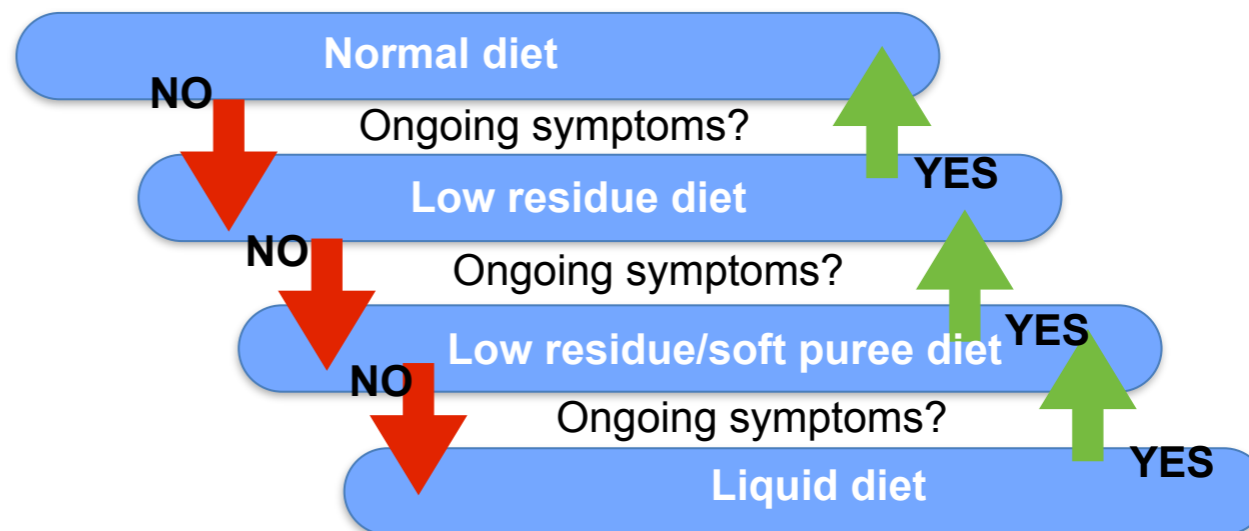
Symptoms

- Intermittent, severe abdominal pain brought on by eating
- Swelling/bloating of the abdomen, associated with the pain
- Vomiting associated with the swelling/ bloating
- Change in bowel habit – constipation or watery diarrhoea
- Borborygmi

Diet

Bowel obstruction can be improved or resolved through medical or surgical management however if this is not possible, risk of bowel obstruction may be reduced and symptoms improved through diet.

The patient may need to progress forward and backwards through the following stages to get the best symptom relief. Patients should be advised that they may need to move between stages at different points of their journey.



A dietitian or specialist nurse can provide more information on each of the stages. Consider a multivitamin and mineral if the diet is very restricted.

Due to dietary restrictions, patients may be at an increased risk of malnutrition and weight loss and oral nutritional supplements should be considered.