



Colon Manometry: Questions and Answers

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Your child is scheduled for a specialized test called colon manometry that will check the motility of the colon. This guide will help to prepare you and your child so that the experience is as successful as it can be.

What is gastrointestinal motility?

- Gastrointestinal motility is the movement of the food that you eat through the entire digestive tract (about 30 feet from the mouth to the rectum).
- Digestion and absorption occur when the movement of food is coordinated by the nerves and muscles that are part of the digestive tract.

What are problems in gastrointestinal motility?

- Nerves and muscles that do not work well together or do not work with enough force contribute to gastrointestinal problems.
- Common examples of symptoms related to motility problems include "heartburn" and constipation.
- Heartburn is a burning sensation that occurs when stomach acid flows back (refluxes) into the esophagus.
- Constipation results when the muscle contractions in the large intestine are not well coordinated. Severe constipation, diarrhea, abdominal distention, and abdominal pain are often related to abnormal muscular contractions of the colon.

What is colon manometry?

- The colon is also called the large bowel or large intestine. Its job is to store and eliminate waste material through muscle contractions.
- The strength of muscle contractions inside the colon is measured during colon manometry. Colonic manometry is the measurement of pressure within the colon.
- The test may be used to help doctors understand the reasons for symptoms in a number of digestive disorders.

What happens during the test?

- First, the colon must be prepared, or cleaned of hard stools. The preparation used will depend on the method chosen by your doctor.
- Your child will be asked not to eat for several hours before testing begins.
- An intravenous needle (IV) will be inserted in the vein to give your child sedating medicine.
- When your child is sleeping comfortably, a flexible plastic tube (colonoscope) is inserted into the colon through the rectum.
- Next, a very thin guidewire is placed through the colonoscope, and the colonoscope is withdrawn, leaving the guidewire in the colon.
- The doctor will then slide a motility tube over the guidewire. The motility tube is a flexible plastic tube as thick as a straw. The guidewire is removed and the motility tube is carefully

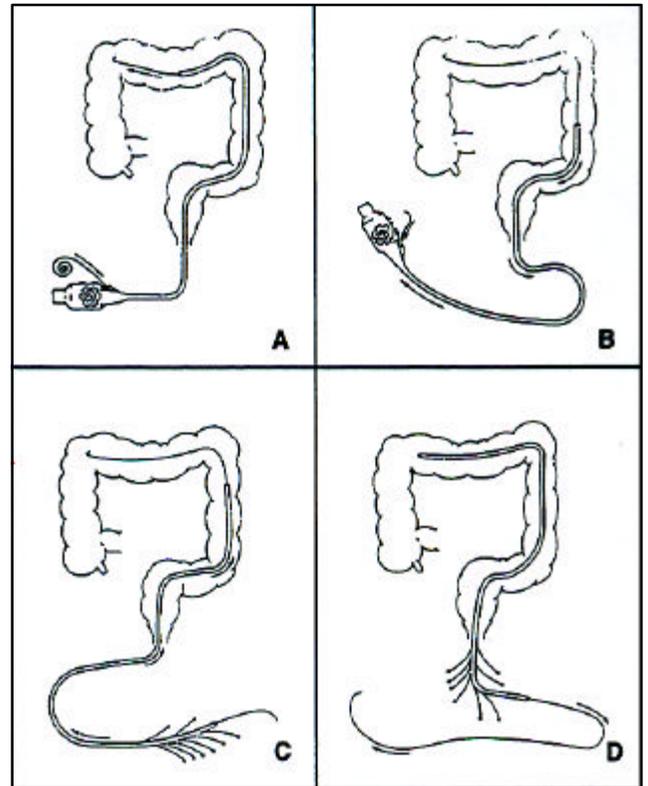
taped into place on the thigh or buttock until the completion of the test. The motility tube has holes at regular spaces that measure the pressure in different areas of the colon.

How long does the procedure take?

- The colon manometry may be as short as 90 minutes or as long as eight hours.
- The doctors may attempt to change the contractions during the study by giving medicines by mouth or injection, or by letting your child eat.
- You may stay with your child during the test. Also, your child must lie in bed. He/she can either sleep or watch television.

Does the test hurt?

- Your child may feel some discomfort due to inserting an IV, lying still for an extended period of time, and possibly injections of medicine.
- The measurement of pressure during the colon manometry is painless; your child will not feel the tube inside his or her colon.



Placement of the motility catheter. A) The colonoscope is advanced beyond the curvature of the colon (splenic flexure) and a guidewire is passed through colonoscope. B) The colonoscope is withdrawn. C) The motility catheter is placed over the guidewire. D) The guidewire is then removed.

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