Meconium Ileus

Newborn Services

This leaflet offers more information about meconium ileus. If you have any further questions or concerns, please speak to the staff member in charge of your baby's care.

What is meconium ileus?

Meconium ileus is a rare condition affecting only 1 in 25,000 babies. Most infants with meconium ileus (90%) have a disease called cystic fibrosis (CF).

Meconium is the first stool (poo) a baby passes. This stool is black / dark green in colour and thick and sticky. Meconium Ileus is a condition where the meconium is extremely sticky and causes a blockage in part of your baby's small bowel, which is called the ileum.

How is it diagnosed?

Early signs of meconium ileus are abdominal distension (a swollen stomach), bilious (green) vomits and no passing of meconium through the rectum (bottom). Your baby will have an abdominal x-ray to see if there is meconium in their intestines and if there are signs of a blockage.

How is it treated?

Milk feeds will be stopped if they have started already. A nasogastric tube will be passed through your baby's nose into the stomach to help remove the bile and any air that may have collected there. This reduces the risk of your baby vomiting and reduces discomfort. S/he will be given intravenous fluids through a drip sited in a vein and antibiotics may be started to treat any infection.

The effects of meconium ileus vary from baby to baby. In some babies, it is possible to dissolve the sticky meconium by injecting a special dye via a soft tube into the baby's bottom (enema) during an x-ray study. This may be repeated within a few hours to fully clear the bowel. In some babies, if there are signs that the blockage has caused complications, the enema may not be indicated and an operation will be necessary. An operation will also be necessary if multiple enemas do not resolve the blockage.

In the operation, an opening is made in the bowel and the sticky meconium is flushed out. Occasionally, it is necessary to bring a small piece of bowel out onto the surface of their abdomen (a stoma) as a temporary treatment for a few weeks.

Once the bowel obstruction is relieved, a blood test will be done to confirm if your baby has cystic fibrosis. The result usually takes several days. In the meantime, your baby will be given a special medicine to reduce the risk of the blockage reoccurring.

What is Cystic Fibrosis (CF)?

This is a common genetic condition. Babies who have CF may have very sticky faeces (poo) causing plugs. Exactly how CF affects the individual child in other ways varies greatly. Children with CF can have frequent chest infections because they have thick mucus in their lungs which they may find difficult to cough up. They may also have problems with digestion and must take medicine with food to help with this. It is difficult to predict how the condition will progress, but early treatment is believed to be beneficial to the long-term outlook of the child.

Can I feed my baby?

Milk feeds will be started slowly over the first few days. This may be your own breast milk or a formula feed. Staff will show you how to express milk for your baby if you wish to do this. If CF is confirmed, your baby will need a medicine called Creon to help them absorb their feeds. This is because babies with CF usually lack the natural gut juices (enzymes) that are needed to digest milk and food. If your baby has CF, it is likely that your baby will need this treatment long term.

If CF is confirmed, a specialist team of doctors and nurses (usually from the Royal Brompton Hospital) will become involved in planning your baby's care and giving you detailed information about the condition.

Useful sources of information

BLISS

Bliss is a support group which can offer support and advice to families with babies with a range of conditions.

Bliss
1st Floor North
10-18 Union Street
London
SE1 1SZ
Enquiries: 020 7378 1122
Email: hello@bliss.org.uk Website: www.bliss.org.uk

Scan the QR code with your smartphone (you may need a QR code scanning app.)

Cystic Fibrosis Trust

Website: www.cysticfibrosis.org.uk

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).
Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.
Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.
Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

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