

patient education program

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Antroduodenal Manometry

What is Antroduodenal Manometry?

Your child's Gastroenterologist has recommended an antroduodenal manometry test. The purpose is to determine how well the muscles of the antrum and the duodenum work, also known as motility. The antrum is the area at the bottom of the stomach, which prepares food to go into the small intestine. The duodenum is the first part of the small intestine, which receives the food. When we measure antroduodenal motility, it is used to measure both the strength and coordination of muscle contractions of the stomach and small intestine.

Preparing for the procedure:

Your child will need to come to Children's Hospital 2 hours before the test and check in at the Access Center in the main hospital. Your child will have an intravenous line (IV) placed for the procedure to administer medications for sedation and for the testing.

During the procedure:

Your child will be taken to the operating room and placed under general anesthesia. The doctor will then insert a small flexible tube which is passed through the child's nose, down the esophagus, through the stomach, and into the small intestine. The tube is passed after the child is sedated, but the manometry test is done after the child wakes up with the tube coming out of their nose.

If the child has a gastrostomy tube, the catheter will be passed through the gastrostomy instead of the nose. The gastrostomy tube will then be replaced after the test is complete.

After the procedure:

After the tube is inserted and secured in place, your child will recover in the post-op area for a short time, and then will be transferred to the Surgical Observation Unit. Here, the tube will be hooked up to a recording machine, where the tube will remain in place for approximately 4 hours. Your child may be given medicines through the intravenous line if the physician thinks it is indicated. The purpose of this is to increase the contractions of the intestines, and the contractions are recorded on the computer. Your child will NOT be allowed to eat or drink for the first 3 hours. Then, your child will eat a meal so the machine can record the changes that occur with eating.

What to expect:

During the test, your child will be free to do any activities that he/she can do in bed. The test does not cause pain, but there may be some discomfort from the tube in the nose. If the tube comes out by accident, the test may have to be stopped to put the tube back into place. Once the test is complete, the IV will be removed, the tape holding the tube in place will be removed, and the tube will be removed by

the nurse. When the tube is removed from the nose, your child may feel like sneezing or complain of a slight sore throat. These symptoms should go away within a few hours.

After the test is complete:

Your child may return to normal diet, play, and activities.

When to expect results:

Results can be expected one week after the testing is complete.