

# Having a contrast follow-through (small bowel meal)

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## What is a contrast follow-through?

The radiology department has been asked by your doctor to arrange for you to have a contrast follow-through.

The procedure involves taking x-ray pictures of your stomach and small bowel. The bowel does not normally show up on x-rays, you will need to have a drink that outlines your bowel, allowing it to show up on the pictures.

A radiologist, a doctor who specialises in x-rays and scans, or a radiographer, a specialist in taking x-rays and scans, performs the procedure.

It is your decision to go ahead with it or not.

This leaflet tells you the purpose of the test, what is involved and what the risks are. You will also receive an appointment letter telling you where to go and your appointment date and time.

## What are the benefits?

Your doctor is concerned that you may have a problem with your small bowel. The purpose of the test is to find out what may be causing your symptoms.

## Are there any alternatives?

Capsule endoscopy (CE) is a procedure to look at the inside of your small bowel using a tiny video camera that you swallow and a tracking system that detects where the capsule is inside you in relation to monitors stuck on to your abdomen.

The camera capsule passes out in your poo and is single use only. This can allow your doctor to make a diagnosis of some problems e.g. ulcers and inflammation but is not suitable if you have narrowing (strictures) in the bowel. A contrast follow-through is better for diagnosing strictures.

Small bowel MRI is another alternative, but not appropriate for some patients.

## What will happen if I decide not to have a contrast follow-through?

Your doctor may not be able to find out the cause of your symptoms or recommend the best treatment for you.

If you decide not to go ahead, you should discuss this carefully with your doctor.

## What does the procedure involve?

### Before the contrast follow-through

If there is any possibility you could be pregnant, you must let the radiology team know before your procedure as x-rays can be harmful to an unborn baby.

**You must not have food, drink or tablets for six hours before your contrast follow-through.**

You may have small sips of water up until two hours before, but nothing at all for the last two hours before your test. This is to ensure your gullet is empty to give clear pictures. If you usually take medicines in the morning, do not take them, but bring them with you to take afterwards. **If you have Parkinson's Disease**, please contact radiology to discuss when is best to take your medicines on the day of your procedure.

**If you have diabetes**, let the radiology team know as soon as possible. We will try to give you the earliest appointment to allow you to eat and drink as soon as possible after the procedure.

## **When you arrive**

The radiology reception desk will send you to the correct waiting area. One of our team will greet you and confirm with you your name and the procedure you are having. Most clothes fastenings and decoration i.e. zips, buttons, poppers, drawstring eyelets, printing, beading and jewellery will show up on x-rays so you will be asked to get changed into a gown to give a clear view.

## **In the x-ray room**

A contrast follow-through can take between one and four hours, although sometimes longer. Every person is different depending on how quickly their digestive system works.

You will need to stay in the x-ray department as x-rays will be taken at regular intervals until the contrast has reached the large bowel.

There are two types of contrast. Barium sulphate liquid, which most people have, is a chalky fruit flavoured liquid, a bit like a milkshake in texture. A water-soluble alternative, Gastromiro®, is used if there is a risk that the liquid may end up in the lungs (aspiration) or a leak is suspected (perforation). This has a slightly bitter orange flavour, like strong marmalade.

You may also have a drug called Metoclopramide mixed in with the contrast. This encourages your stomach to pass the contrast into the small bowel more quickly but it does not act as a laxative.

The nurse will confirm your name and the procedure you are having again. They will check if you have any allergies, answer any questions you may have and gain your consent for the procedure.

You will drink a large cup of the contrast over about 5 minutes and then be shown back to the waiting room until the time for your first x-ray.

A radiographer will call you through for x-ray pictures every 20 minutes for the first hour, and then every 30 minutes after that until the contrast reaches your large bowel. You will need to lie on your front on the x-ray table, if possible, to get the best picture of your small bowel. Once the contrast reaches your large bowel you will have further images taken by another radiologist or radiographer.

Once they have all of the pictures they need, you are free to dress and leave.

You can eat and drink again as you normally would and take any medication.

## **What complications can happen?**

The radiology team will try to make the procedure as safe as possible, but complications can occur. Some of these can be serious and can even cause death.

The possible complications are listed below. Your doctor may be able to tell you if your risk of complication is higher or lower, however they feel that the benefits of having the test are greater than the risks of having it done.

- Radiation exposure. The amount of radiation you receive is kept to a minimum, equivalent to the amount of background radiation you would normally receive in 12-18 months.

- Aspiration – rarely contrast can ‘go the wrong way’ and end up in your airway. We will check before the procedure if you are at risk. Any contrast aspirated can be coughed up, but we may need physiotherapy to help.
- Perforation – contrast leaking out of your digestive tract. This is serious, but rare and usually only happens if there is severe inflammation, has been recent injury or surgery. If you are at risk, we will use the safest contrast, Gastromiro®. If barium leaks out it can cause mediastinitis or peritonitis (inflammation of the lining of the chest cavity or abdominal cavity).
- Allergic reaction to the equipment, materials or medication. The radiology team are trained to detect and treat any reactions that may occur. Let them know if you have any allergies or if you have reacted to any medication or tests in the past.

You may feel a little bloated afterwards whilst the barium works its way through your digestive system. We advise you to have plenty of fluids and fibre for 36 hours afterwards to help you pass the barium. Your poo will look white and can remain looking paler for a number of days. Some people may get slightly constipated; a mild laxative may help if needed.

## Getting your results

The radiologist or radiographer will examine your pictures and send a report of the results to the doctor who sent you for the test.

- If your GP sent you for the test the results will be sent to them. Please make an appointment for 10-14 days after your contrast swallow.
- If a doctor / consultant from the outpatient department sent you for this test, the results will be sent to them. If you have not already got an appointment to see them again, you will be sent one in the post. If you do not hear anything within one month, please contact your consultant’s secretary for advice.

If you have any questions, you can contact us using the telephone number on your appointment letter.

## Further Information

[www.rcr.ac.uk](http://www.rcr.ac.uk) (Royal College of Radiologists)

[www.nhs.uk](http://www.nhs.uk)

### Your Feedback

We want your visit to be as comfortable as possible - talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve it, then ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care.

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### OUR VALUES

#### Collaboration

We work positively with others to achieve shared aims

#### Accountability

We act with professionalism and integrity, delivering what we commit to, embedding learning when things do not go to plan

#### Respect

We are anti-discriminatory, treating people fairly and creating a sense of belonging and pride

#### Empowerment

We speak out when things don't feel right, we are innovative and make changes to support continuous improvement

#### Support

We are compassionate, listen attentively and are kind to ourselves and each other



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

**For a large print version of this leaflet, contact PALS 01493 453240**