Gastroparesis

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Gastroparesis is a medical condition that causes a delay in food leaving your stomach. It happens more often in women than in men.

Gastroparesis can develop if you have:

- diabetes
- had a recent viral infection
- used pain medicines for a long time.

There also may be no obvious cause for gastroparesis.

Symptoms

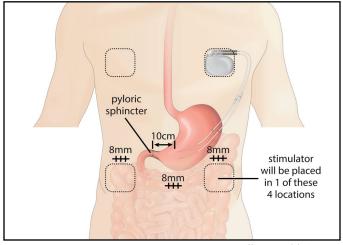
Symptoms of gastroparesis include:

- nausea and vomiting
- abdominal bloating
- belching
- feeling full after only a few bites of food (early satiety)
- heartburn or stomach contents coming back up into your throat or mouth (reflux)
- weight loss caused by repeated vomiting.

Diagnosis

Your health care provider may:

- give you an exam
- talk about your personal and family health history
- order the following tests:
 - gastric emptying study
 - upper endoscopy.



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Gastric stimulator will be placed in 1 of 4 locations shown above.

Treatment

Treatments for gastroparesis include:

- diet changes
- stopping certain medicines
- taking medicines for nausea
- taking medicines that help the stomach empty (promotility agents).

Surgery

If other treatments do not help, you may need surgery.

A gastric stimulator puts out mild electrical pulses. These pulses stimulate the vagus nerve to help reduce nausea and vomiting.

During surgery

- Wires are placed into the muscle layers of your stomach.
- An endoscope (a flexible tube with a small camera at the end) is guided through your mouth into your esophagus. It is used to confirm the wires are in the correct spot.
- A battery is placed under the fat layer in your abdomen or your chest (left or right side) The wires from the stimulator are attached to the battery.
- The battery is turned on during surgery.

 The stimulator will start to work right away.
- Surgery will take 1 to 2 hours. You will be asleep during surgery.
- Most people will go home the same day. Your symptoms should get better within a few months.
- Your gastroenterologist will adjust your gastric stimulator setting during your follow-up visit.

Pain Relief

You may have some pain after surgery at the incisions and battery placement location.

- Your surgeon may recommend:
 - over-the-counter medicine such as acetaminophen (Tylenol®) or ibuprofen (Advil®).
 - pain medicine or medicine to help with nausea
 - Use an ice pack on your incisions to reduce pain and swelling.
- Constipation is common after surgery. You may take an over-the-counter liquid laxative such as Milk of Magnesia[®], MiraLAX[®] or magnesium citrate.

After Surgery

■ You may take a shower 1 to 2 days after surgery. Do not take a tub bath or swim until your incisions heal completely (2 to 3 weeks).

- Resume the diet plan you were on before surgery. If that diet is not working well, try liquids first, then slowly add soft foods.
- If you have had a robotic surgery, do not lift more than 10 pounds for 2 weeks.
- If your surgery required an open incision, do not lift anything heavier than 10 pounds for 6 weeks after surgery.
- You should be able to return to work 2 to 3 weeks after surgery.

Complications

All surgery has a risk of bleeding, infection or complications from anesthesia. Your battery or wires may need to be removed if you get an infection. They can be replaced once the infection clears up.

The battery may shift or move. The battery should last 3 to 5 years depending on the settings. It can be replaced through the same incision. If the wires are OK, they can be connected to the new battery.

When to Call Your Surgeon

Call your surgeon if you have:

- a temperature of 101 F or higher
- increased pain or tenderness that can't be relieved with rest or pain medicine
- signs of infection at your incision site
 - pain
 - swelling
 - redness
 - green or yellow discharge
- any questions or concerns.

Follow-up Appointment

Make a follow-up appointment with a gastroenterologist who specializes in gastric stimulators 1 month after your surgery. During this visit your stimulator settings will be checked and adjusted if needed.