

# Gastroschisis

## What is Gastroschisis?

Gastroschisis is a condition that occurs early in a pregnancy when the baby's abdominal wall muscles do not form properly. It causes abdominal organs, such as the intestines and gonads, to protrude outside of the abdominal wall just to the right of the belly button.

About 2,000 babies are born with Gastroschisis each year in the United States according to the Centers for Disease Control and Prevention (CDC). Recent studies have found that Gastroschisis is more common in babies who have younger mothers, whose mothers use ibuprofen during pregnancy, had a urinary tract infection just before becoming pregnant or early in the pregnancy, consumed alcohol or smoked.

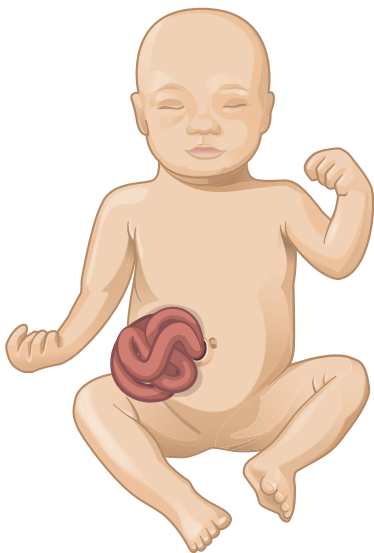
## How is Gastroschisis diagnosed during pregnancy?

Gastroschisis can be diagnosed as early as 14 weeks into a pregnancy through a routine ultrasound.

## How is Gastroschisis treated?

During the pregnancy, babies with Gastroschisis are monitored through regular ultrasounds to watch for possible intestinal complications, and monitor the baby's growth. The goal is to monitor the baby for any additional problems, and to help the baby reach an optimal delivery date.

If doctors notice that the hole in the abdomen is closing too tightly around the intestines, where permanent damage could occur, early delivery of the baby may be discussed. Many babies with Gastroschisis arrive a few weeks early, around 36 to 37 weeks. Most babies with Gastroschisis can be delivered vaginally without additional complications.



*Baby With Gastroschisis*



*Healthy Baby*

A Cardinal Glennon St. Louis Fetal Care Institute nurse is available 24 hours a day, seven days a week to discuss referrals with physicians and potential families by calling 314-268-4037, option 2.

Phone 314-268-4037, option 2  
Toll-free 1-877-SSM-FETL (776-3385)  
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## Gastroschisis

### How will Gastroschisis affect my baby after delivery?

Babies with Gastroschisis require special attention when they are born, so it is important for them to be delivered at a facility that has the equipment, team and experience to care for them. When a baby with Gastroschisis is born the exposed intestines will be covered with a special, sterile plastic bag, and a nasogastric (NG) tube will be inserted through the nose or mouth. This tube prevents the baby from choking and breathing stomach contents into the lungs. Babies with Gastroschisis often undergo surgery to close the abdominal wall defect the day they are born.

In more severe cases of Gastroschisis, a baby will receive what is called a silo. A silo is a special spring-loaded silicone sack that is placed over the exposed intestines. Over the course of a few days the bag is made smaller and smaller, pushing the intestines back into the abdomen. Once the intestines are back in the abdomen, the muscle and skin are closed over the hole.

Most babies born with Gastroschisis spend four to six weeks in the neonatal intensive care unit (NICU) following surgery. At first, they are often on a breathing machine while their pain is controlled and nutrition is given through an IV to allow the intestines time to heal. Because the intestines are exposed to amniotic fluid during the pregnancy it often takes a few weeks for them to develop the contractions needed to help move food through the intestinal tract. When the intestines start to work the baby will start feeding normally and prepare for the trip home.

In rare cases babies with Gastroschisis may have a bowel obstruction, or atresia (part of the intestine is narrowed or missing), which may require additional surgeries.

Despite the fact that they are often smaller at birth, babies with Gastroschisis tend to catch up with other children their age. Babies with Gastroschisis have a 90-percent survival rate, and long-term they are likely to develop normally.

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While we can't change the diagnosis, we can provide you expert care and support, helping your child get the most out of treatment and life. If you're facing a diagnosis, schedule an appointment with us at the Cardinal Glennon St. Louis Fetal Care Institute. You may call our team directly at 314-268-4037 or speak with your doctor about the potential of a referral.

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