

Intestinal Atresia

What is Intestinal Atresia?

Intestinal atresia is a narrowing, blockage, or absence of a portion of the small or large intestine in an infant before they are born. Intestinal atresia can be caused by a problem with the blood supply to the intestines, such as a blood clot, during development.

Intestinal atresia is often detected by ultrasound during the second or third trimester. The fetal stomach will be abnormally shaped or enlarged. There can also be an excess of amniotic fluid in the womb. Too much amniotic fluid in the uterus is known as polyhydramnios, which can cause preterm labor.

If your baby has been diagnosed with intestinal atresia, the SSM Health Cardinal Glennon St. Louis Fetal Care Institute is able to comprehensively monitor and treat this condition, using the safest techniques to treat your child after delivery.

Surgical repair of the blockage after delivery is often the standard of care for this condition. After surgery, the prognosis for babies with intestinal atresia is quite good, with most developing normally.

The graphic shows a baby with intestinal atresia. A portion of the intestine is non-existing and needs to be repaired.



Healthy Baby



Baby with Atresia

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)
Web stlouisfetalcare.com
Email fetalcare@ssmhealth.com
Facebook facebook.com/fetaldocs

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How Is It Managed and Treated During Pregnancy?

Intestinal atresia does not require fetal intervention. At the Cardinal Glennon St. Louis Fetal Care Institute, your baby will be monitored for fetal distress, which could be a sign of additional damage to the intestine. In some cases this increased damage would require an early delivery of the baby.

Throughout your pregnancy, frequent ultrasounds are performed to check your baby's development. Fetal echocardiograms (echo) may also be done to assess the condition of your baby's heart.

Your nurse coordinator will arrange for you to meet with our maternal fetal medicine specialists, neonatologists and pediatric surgeons to plan the best delivery scenario and treatment for you and your baby.

What Can Be Expected After Delivery?

Babies born with intestinal atresia are typically treated with surgery to repair the intestine. This takes place one or two days after delivery. Surgery involves connecting the obstructed part of the intestine to the portion of intestine that is healthy, just beyond the blockage. To allow air and fluid to escape while your baby's bowel heals, the doctor will put in place a nasogastric (NG) tube, which is passed through the nose to the stomach. From here, it may take a few days or several weeks, for your baby to regain intestinal function.

During this time, your baby receives nutrition intravenously in the neonatal intensive care unit (NICU). Your baby can also slowly begin to receive breast milk or formula by mouth or a feeding tube.

Following their time in the NICU, your baby will require regular follow-up to ensure their intestines are absorbing the nutrients they need to grow and develop adequately. A vast majority of the babies we care for go on to lead normal, healthy lives following surgery. Should your child need extra support, the Glennon Intestinal Rehabilitation and Feeding (GIRAF) team can provide ongoing, coordinated care to ensure adequate nutrition throughout your child's development.

We understand that intestinal atresia can be a scary diagnosis. That's why we're available to help 24 hours a day, 7 days a week. For more information or to schedule an appointment, call us at 314-268-4037 or toll free at 877-SSM-FETL (877-776-3385).

While we can't change the diagnosis, we can provide you expert care and support, helping your baby get the most out of treatment and life.
