

William F. Erber, M.D., P.C.
Gastroenterology and Endoscopy
Diseases of the Digestive Tract, Liver and Pancreas
Board Certified

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Enteroscopy

Enteroscopy is a procedure used to examine the small intestine (small bowel).

How the Test is Performed

A thin, flexible tube ([endoscope](#)) is inserted through the mouth and into the upper gastrointestinal tract. During a double-balloon enteroscopy, balloons attached to the endoscope can be inflated to allow the doctor to view a section of the small intestine.

In a [colonoscopy](#), a flexible tube is inserted through your rectum and colon. The tube can most often reach into the end part of the small intestine (ileum).

Tissue samples removed during enteroscopy are sent to the lab for examination.

How to Prepare for the Test

Do not take products containing aspirin for 1 week before the procedure. Tell your doctor if you take blood thinners such as warfarin (Coumadin) or clopidogrel (Plavix), because these may interfere with the test. Do NOT stop taking any medication unless told to do so by your health care provider.

Do not eat any solid foods or milk products after midnight the day of your procedure. You may have clear liquids until 4 hours before your exam.

You must sign a consent form.

How the Test will Feel

You will be given calming medicine for the procedure and will not feel any discomfort. You may have some bloating or cramping when you wake up. This is from air that is pumped into the abdomen to expand the area during the procedure.

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Why the Test is Performed

This test is most often performed to help diagnose diseases of the small intestines. It may be done if you have:

- Abnormal x-ray results
- Tumors in the small intestines
- Unexplained diarrhea
- Unexplained gastrointestinal bleeding

Normal Results

In a normal test result, the health care provider will not find sources of bleeding in the small bowel, and will not find any tumors or other abnormal tissue.

What Abnormal Results Mean

Signs may include:

- Abnormalities of the tissue lining the small intestine (mucosa) or the tiny, finger-like projections on the surface of the small intestine (villi)
- Abnormal lengthening of blood vessels (angiectasis) in the intestinal lining
- Immune cells called PAS-positive macrophages
- [Polyps](#) or cancer
- [Radiation enteritis](#)
- Swollen or enlarged [lymph nodes](#) or lymphatic vessels
- Ulcers

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Changes found on enteroscopy may be signs of disorders and conditions, including:

- [Amyloidosis](#)
- [Celiac sprue](#)
- [Crohn's disease](#)
- [Folate](#) or [vitamin B12](#) deficiency
- [Giardiasis](#)
- Infectious [gastroenteritis](#)
- [Lymphangiectasia](#)
- [Lymphoma](#)
- Small intestinal angiectasia
- [Tropical sprue](#)
- [Whipple's disease](#)

Risks

Complications are rare but may include:

- Excessive bleeding from the biopsy site
- Hole in the bowel (bowel perforation)
- Infection of the biopsy site leading to [bacteremia](#)
- Vomiting, followed by [aspiration](#) into the lungs

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Considerations

Factors that prohibit use of this test may include:

- Uncooperative or confused patients
- Untreated blood clotting (coagulation) disorders
- Use of aspirin or other medicines that prevent the blood from clotting normally (anticoagulants)

The greatest risk is bleeding. Signs include:

- [Abdominal pain](#)
- [Blood in the stools](#)
- [Vomiting blood](#)

Alternative Names

Small bowel biopsy; Push enteroscopy; Double-balloon enteroscopy; Capsule enteroscopy; Sonde enteroscopy

References

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