

先天性腸道阻塞

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簡介：99%的足月新生兒，在 24 小時內會有胎便解出，百分之百會在 48 小時內解出。早產兒會較慢解胎便，約有 32%在 48 小時後才解，但是 99%會在第九天前解出。若是新生兒未解胎便且有逐漸惡化的腹脹或嘔吐，就應該懷疑是否有腸阻塞的情形，並加以評估。

疾病分類：

分類：可粗略分為兩類，閉鎖(atresia)或狹窄(stenosis)以及功能性的腸阻塞

- 閉鎖(atresia)或狹窄(stenosis)：

- 分類

- ◆ esophageal atresia:發生率 1/4,500
- ◆ gastrointestinal atresia or stenosis:
 - duodenum - 45%; jejunum - 25%; ileum - 15%; colon - 5%; multiple - 10%;
- ◆ Malrotation and midgut volvulus: 發生率1/600
- ◆ Anorectal malformation: 發生率 1/4,000 to 1/8,000

- 診斷

- ◆ esophageal atresia: failure to pass NG tube
- ◆ atresia and stenosis: KUB, bile-stained vomiting
- ◆ malrotation: lower GI series, upper GI series (應保留於較難診斷的病例，因為有顯影劑滯留的問題)
- ◆ anorectal malformation: inspection; lower GI series

- 治療

- ◆ 以外科治療為主，若是不能禁食，則應給予全靜脈營養。

- 功能性的腸阻塞

DIAGNOSIS	FREQUENCY	ABNORMAL FINDINGS	THERAPY
Hirschsprung's disease	1/4,000	Tight anus, empty rectum, transition zone	Surgery
Meconium plug syndrome	1/500 to 1/1,000	Meconium plugs	Rectal stimulation, enema
Meconium ileus	1/2,800	Abdominal distention at birth, cystic fibrosis	Enema with intravenous fluids, surgery
Small left colon syndrome	Rare	Transition zone at splenic flexure	Enema, rarely, colostomy

Hypoganglionosis	Rare	Transition zone	Medical, TPN, surgery
Neuronal intestinal dysplasia type A	Rare	Transition zone, mucosal inflammation	Medical, surgery
Neuronal intestinal dysplasia type B	Rare	Megacolon	Medical, rarely, surgery
Megacystis-microcolon-intestinal hypoperistalsis syndrome	Very rare	Microcolon, megacystis	TPN

- 診斷工具：
 - KUB, lower GI series, rectal suction biopsy, anorectal manometry
- 注意事項：
 - 高達 25%的 Hirschsprung's disease 的新生兒一開始的片子上是看不到 transitional zone 的。
 - Meconium Ileus 的嬰兒 50%有 volvulus, atresia, or perforation，大部分的嬰兒有 cystic fibrosis (cystic fibrosis 的嬰兒 15%有 meconium ileus)，lower GI series 可看到 microcolon (meconium plug 是漲大的大腸及小腸)。
 - 70%的anorectal malformation病人有associated malformation，50%有泌尿系統問題，VACTERL(Verterbra, Atresia, Cardiac, T-E fistula with esophageal atresia, Renal, radial upper Limb)要加以考慮。
 - >50% small left colon syndrome 與 GDM 有關，其他包括 hypothyroidism, hypoglycemia, sepsis, hypermagnesemia, maternal use of psychotropic drugs。它是暫時性的。
 - Neuronal Intestinal Dysplasia type A: hypoplasia or aplasia of the myenteric plexus and mucosa, along with mucosal inflammation.
 - Neuronal Intestinal Dysplasia type B: dysplastic submucosal plexus and numerous giant ganglia with many giant and small ganglion cells.
 - Megacystis-microcolon-intestinal hypoperistalsis syndrome: small bowel dilated, microcolon, abundance of ganglion cells in the entire GI tract. Associated with megacystis and megaureters.

參考文獻

1. Am Fam Physician 1999;60:2043-50
2. BMJ 1996;27:236-9