

Stents for a blocked duodenum

This fact sheet is for people with pancreatic cancer who are having a stent put in to treat a blocked duodenum. Families may also find it helpful. It explains what stents are, when they are used, how they are put in, possible problems and managing your diet with a stent. There is also information about the support available to you.

Every hospital will do things slightly differently so use this fact sheet as a general guide. Ask your doctor or nurse for more information about your treatment.

You can also speak to our specialist nurses on our confidential Support Line. Call free on **0808 801 0707** or email **nurse@pancreaticcancer.org.uk**

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Key facts

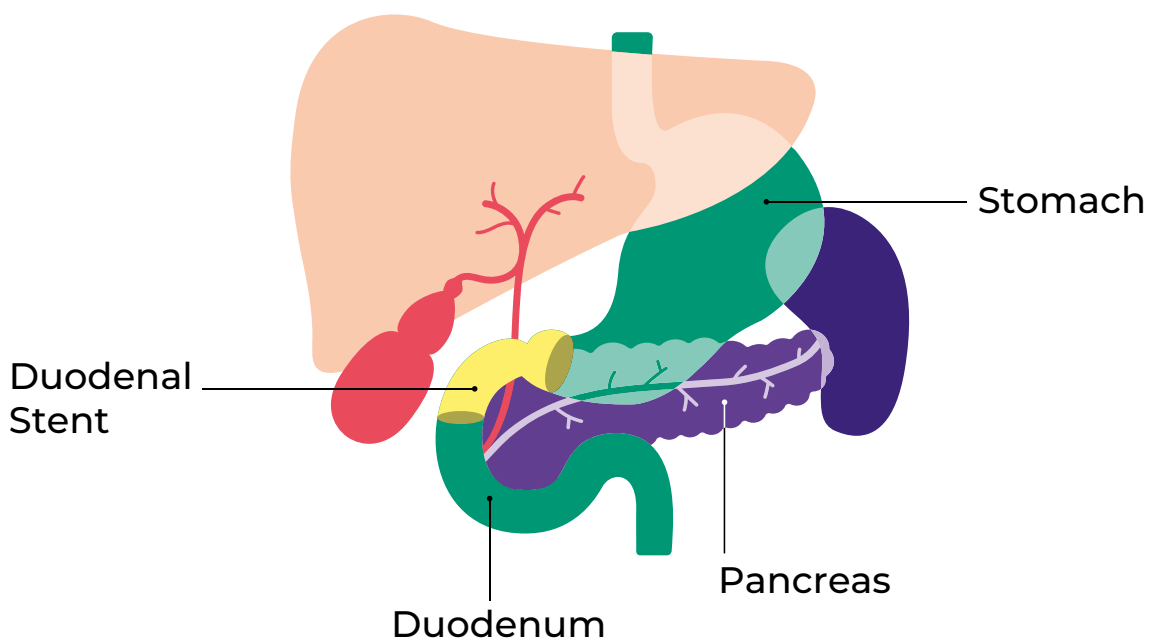
- The duodenum is the first part of the small intestine. After you eat, food moves from your stomach into your duodenum where it is broken down (digested).
- Pancreatic cancer can block the duodenum. This happens when the cancer presses on the duodenum and stops the food passing out of the stomach. This is called gastric outlet obstruction.
- It can make you feel full up, feel sick, vomit large amounts, lose weight and have tummy pain, bloating and cramps.
- A stent is a tube. It can be used to hold open the duodenum and let the food pass through.
- Once you have a stent put in, you should start to feel better quite quickly. It should stop you being sick, and you should start to feel like eating again.
- Treating your symptoms with the stent may mean you can start or continue treatment for the cancer.
- Putting the stent in takes around 30-40 minutes. You will be given a sedative to make you feel relaxed and sleepy.
- Sometimes there can be problems with stents including blockages. Less often, the stent may move out of place, you may have some discomfort or you may get an infection.
- You should be given information to help you with your diet after you have the stent put in. You will need to be careful about what you eat to stop the stent getting blocked.
- Talk to your medical team about any questions you have. You can also speak to our specialist nurses on our free Support Line.

What are stents and when are they used?

Stents are tubes. A stent for the duodenum is called a duodenal stent. You may have a duodenal stent put in if your cancer can't be removed by surgery. If you are having longer term treatment and are well enough, your doctor should consider bypass surgery rather than a stent.

Stents are also used to treat a blocked bile duct – these are called biliary stents.

Diagram showing a duodenal stent



Read more about bypass surgery on our website at:

pancreaticcancer.org.uk/bypass

Read more about biliary stents for a blocked bile duct in our fact sheet: [Stents to treat jaundice caused by a blocked bile duct.](#)

Or on our website at: pancreaticcancer.org.uk/biliarystent



Questions to ask your doctor or nurse

Will a stent improve my symptoms?

How quickly will I recover after the stent is put in?

Will I need to change my diet once I have a stent?

Will I see a dietitian?

Will a stent affect future treatment such as chemotherapy?

Will a stent mean I can start or continue treatment?

Will I feel the stent inside me?

Will the stent ever need to be removed?

Advantages and disadvantages of stents

Advantages

- The stent should open the blocked duodenum and treat your sickness.
- You should start feeling better quickly, normally within a couple of days of having the stent put in.
- Treating symptoms may mean you can start or continue treatment for the cancer, such as chemotherapy.

Disadvantages

- The stent may get blocked and the symptoms you had before may come back.
- Some people may still feel sick after having a stent put in. If this doesn't get better speak to your doctor.
- There is a small chance of your stent moving after it has been put in. If this happens it may need to be replaced.
- There is a small risk of complications such as a hole in the duodenum or bleeding. A hole in the duodenum can also cause infection.

How is the duodenal stent put in?

You may go into hospital the day before the stent is put in, or on the day. You will be asked not to eat or drink for at least eight hours before to make sure that your stomach and duodenum are as empty as possible. Tell your doctor or nurse if you take blood thinning medicine or have diabetes, as this might affect your care before the stent is put in.

You will have a sedative, which will make you very sleepy and relaxed. A tube with a camera on the end, called an endoscope, is put in through your mouth and down into the duodenum. A fine wire is then used to guide the stent into place inside the duodenum. The procedure takes 30-40 minutes.

What happens afterwards?

Once the sedative wears off, you will usually be able to drink. Once you can drink without problems you will be able to eat. At first you will have softer foods so that the stent does not get blocked. Sometimes it can take a while for your stomach to start emptying properly again. You may be given medicine to help your stomach empty.

You may need to stay in hospital overnight, but this will depend on how quickly you recover.

If your stent gets blocked, you may feel or be sick. If this happens, contact your doctor or nurse. Or go to A&E if you can't reach them.

Will I feel better?

After the stent has been put in your symptoms should begin to improve. For example, you should stop feeling sick and find it easier to eat.

Some people may still feel sick after having a stent put in. This is because food will move through the stent differently to how it moves through the duodenum. This means food may stay in the stomach for longer. Speak to your doctor if this does not get better. They may give you anti-sickness medicines and suggest changes to your diet.

You will need to be careful what you eat so the stent does not get blocked. If you need advice or have problems speak to your nurse or dietitian.

You can also speak to our specialist nurses on our Support Line

How should I manage my diet with a duodenal stent?

Pancreatic cancer can reduce the number of enzymes your pancreas makes. These enzymes help break down (digest) food. You can take pancreatic enzyme replacement therapy (PERT) to deal with this and help you digest your food properly.

You should get information about your diet after having the stent put in. You will have softer foods at first. It may help to start with semi-liquid or pureed foods and then move on to soft foods.

You will need to be careful about what you eat to make sure the stent doesn't get blocked. These tips may help.

- Take your time eating, and make sure you chew your food well.
- Eat smaller meals more often.
- Eat a variety of foods to make sure you get enough nutrients.
- Sit up when you eat and don't lie down after meals. This will help to digest your food.
- Avoid drinking too much with your meals as this can fill you up.

You will need to eat soft foods that are easy to chew, such as:

- porridge or cereal soaked in milk
- pureed soup (add cream, milk or cheese for extra nutrients and calories)
- poached fish or minced meat
- eggs, including poached and scrambled eggs or an omelette
- soft pasta dishes, such as macaroni cheese
- mashed potato (add butter, cream or cheese for more calories)
- vegetables well cooked until they are soft
- rice pudding, stewed fruit, yoghurt, custard or ice cream.

Try to avoid foods that might block the stent. These include:

- raw vegetables or vegetables that are harder to digest, such as salads, celery, green beans and sweetcorn
- nuts and dried fruit
- citrus fruits like oranges or grapefruit – this is because of the skin around each segment
- tough or gristly meat
- bread, as it expands in your stomach
- wholegrain foods, such as wholegrain pasta or rice, as they are more difficult to digest.

If you are not sure if you can still eat your preferred foods, speak to your doctor, nurse or dietitian.

Read more about eating, diet and pancreatic enzyme replacement therapy (PERT) in our booklet: [Diet and pancreatic cancer](#).

Or on our website at: pancreaticcancer.org.uk/diet

You can also talk to the specialist nurses on our Support Line for information about diet with a duodenal stent.

Are there any problems with stents?

Blockages

The main problem with stents is that they can get blocked. This can be caused by the cancer growing through the stent or by food building up inside it. If you start feeling or being sick again, speak to your doctor or nurse. Or go to A&E if you can't reach them. They can check if the stent is blocked.

If this happens another stent can be put in to treat the blockage. Your nurse or dietitian should tell you what foods to have to stop the stent getting blocked. Read more about eating and diet on page 6.

Stent moving out of place

Sometimes stents can move out of place. If this happens the stent is usually removed and a new one put in. Tummy pain or vomiting may be signs that your stent has moved. Speak to your doctor or nurse if you get any of these symptoms. They can decide if the stent needs to be replaced.

Discomfort

Occasionally stents cause discomfort in the upper tummy when they are first put in. This is not common and normally gets better over a few days.

Other possible problems

There are some other possible problems from having a stent put in, but these are very rare. For example, there is a risk of the procedure causing a hole in the duodenum during or after the stent is put in. This can cause bleeding, being sick, or an infection. There is also a small risk of infection caused by the stent getting blocked.

If you have any problems, call your nurse or doctor. If you can't reach them, go to A&E. If you have any questions about stents, speak to your medical team.

You can also speak to our specialist nurses on our free Support Line about problems with duodenal stents.

More information and support

We are here for you

If you or someone you care about has pancreatic cancer, we are here to help.

Find out more at: pancreaticcancer.org.uk/support

Our specialist nurse Support Line

Our specialist nurses are experts in pancreatic cancer. They can talk for as long as you need, as often as you like. Whether you have a long list of questions or don't know where to start, they will provide practical, honest information to help you make the right choice for you.

Call free on **0808 801 0707** or email nurse@pancreaticcancer.org.uk

Information about pancreatic cancer

Our website, videos and publications can answer your questions. The information can help you understand what you have heard from your medical team, and make decisions about your treatment and care.

Go to: pancreaticcancer.org.uk/information

Download or order our free publications at:

pancreaticcancer.org.uk/publications or call **0808 801 0707**

Real life stories

Whether you want to read other people's stories or tell your own, sharing experiences of pancreatic cancer could help.

Go to: pancreaticcancer.org.uk/stories

Webinars

Our regular webinars cover topics including diet, wellbeing and treatment. They are hosted by our friendly nurses and other experts, are informal, and you can ask questions. You can look back at previous sessions, or sign up to one.

Go to: pancreaticcancer.org.uk/webinars

Useful organisations

Cancer Research UK

cancerresearchuk.org

Helpline: 0808 800 4040 (Mon-Fri 9am-5pm)

Information for anyone affected by cancer.

Macmillan Cancer Support

macmillan.org.uk

Support Line: 0808 808 0000 (7 days a week, 8am-8pm)

Provide practical, medical and financial support for anyone affected by cancer.

Maggie's

maggies.org

Tel: 0300 123 1801

Centres around the UK and online offer free practical, emotional and social support for anyone affected by cancer.

NHS 111 Wales

111.wales.nhs.uk

Health information in Wales, including local services.

NHS Inform

nhsinform.scot

Information about health conditions, living well and local services in Scotland.

NHS website

nhs.uk

Information about health conditions, living well and local services in England.

nidirect

nidirect.gov.uk

Information about local services in Northern Ireland, including health services.

This fact sheet has been produced by the Support and Information Team at Pancreatic Cancer UK.

We make every effort to make sure that our services provide up-to-date, accurate information about pancreatic cancer. We hope this will add to the medical advice you have had, and help you make decisions about your treatment and care. This information should not replace advice from the medical team – please speak to your doctor, nurse or other members of your medical team about any questions.

Email us at **publications@pancreaticcancer.org.uk** for references to the sources of information used to write this fact sheet.

Give us your feedback

We hope you have found this information helpful. We are always keen to improve our information, so let us know if you have any comments or suggestions. Email us at **publications@pancreaticcancer.org.uk** or write to our Information Manager at the address below.

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