

# Meckel's Diverticulum



## Surgical Department

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### What is Meckel's diverticulum?

It is a pouch that is formed by a bulge in the small bowel (intestine). Approximately, 1 to 2% of babies are born with this pouch. Most children live with this pouch and never have any problems. Other children have problems later like inflammation, infection, ulcer-like sores and bleeding.

### How will I know if my child has Meckel's diverticulum?

Meckel's diverticulum makes hydrochloric acid. This acid eats away at the lining of the intestine and the walls of nearby blood vessels, which causes bleeding.

Most children come to the doctor because they have bright red blood in the stools (body waste). Children under 2 years may bleed a lot. The doctor will order a Meckel's Scan to check for this pouch.



The Meckel's Scan is done by Nuclear Medicine at BC Children's Hospital.

To learn more about Meckel's Scan, read the [Meckel's Scan](#) pamphlet. You can find it under 'M' in the BC Children's A-Z pamphlets at: [www.bcchildrens.ca/KidsTeensFam/A-ZPamphlets](http://www.bcchildrens.ca/KidsTeensFam/A-ZPamphlets)

### How is Meckel's diverticulum treated?

Meckel's diverticulum is treated by removing the pouch from the small bowel (intestine). This is done by a surgeon.

- ▶ Before the surgery, your child will have a blood test.
- ▶ If your child has lost a lot of blood, it will be important to replace the fluids, salts and minerals your child has lost. Your child will have an intravenous (IV) put in his or her

hand or foot. The IV will replenish the fluids, salts, sugar and minerals in your child's body before and after the surgery.



To prepare you and your child for surgery, please visit the BC Children's Hospital: Getting Ready for Surgery at: <http://www.bcchildrens.ca/Services/SurgeryAndSurgSuites/Getting+Ready+for+Surgery.htm>

Here you will find a Virtual Surgery Tour and other resources to help prepare you and your child for surgery.

### What happens during the surgery?

- ▶ The surgery is done in the operating room.
- ▶ Before the surgery begins, your child will be given a general anesthetic (sleep medicine). This will help your child fall asleep.
- ▶ Once your child is asleep, your child's surgeon will make a small cut (7 cm) to remove the pouch and some of the intestine around it.
- ▶ Your child's surgeon will close the cut with stitches that dissolve. The cut will also be taped together with thin strips that fall off in 5 to 7 days.

### What should we expect after the surgery?

- ▶ After the surgery, your child will recover in the Post-Anesthetic Care Unit (PACU).
- ▶ A specially trained nurse will check your child closely while he or she recovers from the medications given during the surgery.
- ▶ When your child is ready to leave the PACU, he or she will go to one of the wards. You are encouraged to stay with your child throughout the hospital stay.

- ▶ Your child will still have the IV that was put in his or her hand or foot for the surgery. The IV will stay in while the intestine starts to heal.
  - Your child will continue to receive fluids, salts, minerals, and some sugar through the IV.
  - Your child will NOT have regular food for 2-3 days after the surgery. Your child may be able to drink small amounts of clear fluid on day 2 after surgery. Your child's doctor or nurse will let you know if this is allowed.
  - When your child starts passing gas, it is a sign that he or she may be ready to drink small amounts. Your child can then slowly return to a normal diet.
- ▶ Your child's first bowel movement after surgery may contain blood. This is normal.
- ▶ Your child will have pain medication so that he or she is comfortable. It is important to tell the nurses the ways you normally comfort your child when he or she is in pain.
- ▶ Your child can go home between day 3 and 6 after surgery if he or she is comfortable and able to drink enough fluid.

### How do I care for my child at home?

Your child will not need any special care at home. He or she can play, eat, bath and rest as usual. He or she will likely start most regular activities within a couple weeks after surgery.

If your child feels sore, you can give your child pain medication, such as acetaminophen (e.g. Tylenol) or ibuprofen (e.g. Advil or Motrin). **Do not give your child acetylsalicylic acid (e.g. aspirin).** Check the label for contents and correct dose.

If the tape on the wound has not fallen off by day 10, you can take them off.

### Call your child's family doctor if:

- ▶ Your child's incision gets red, swollen, or feels wet and sticky
- ▶ Your child's incision opens up
- ▶ Your child runs a fever, looks very sick, vomits or refuses to eat

### When does my child see his or her surgeon?

Your child's surgeon will let you know if you need to see him or her in the clinic.

If you have any concerns once you have gone home, please contact your child's surgeon. They want to hear from you!

*At Children's & Women's Health Centre of British Columbia we believe parents are partners on the health care team. We want you to be as informed as possible. This brochure will answer some of your questions. Please ask about things you do not understand and share your concerns.*



*If you have any questions, please call:*  
**604-875-2345, local 7720**