

### **Oral / Rectal contrast material**

Patients are given a barium sulphate suspension, which is known for its high "X-ray density", in combination with a "negative contrast material" (air), for gastrointestinal tract examinations. The barium sulphate suspension "contrasts" the mucosa while the negative contrast material serves to unfold the gastrointestinal tract, which makes it possible to view the mucosal contours.

The barium sulphate suspension is not absorbed by the body. It is excreted through the intestine. Your stools may therefore be white for a few days.

After taking large quantities of this contrast material you should take sufficient fluids in order to avoid constipation.

An iodised water-soluble contrast material for oral intake is used if a perforation of the stomach is suspected, or if a foreign body is in the esophagus.

### **Side effects of contrast material**

Barium sulphate is not absorbed by the body and is eliminated in unchanged form. In some cases it may cause constipation, which can be prevented by taking large quantities of fluid.

Barium sulphate suspensions should not be used if "leaks" in the intestinal tract are suspected (e.g. fistula, a perforated ulcer). A safety period of 3 days should always be observed between a biopsy and an X-ray examination when a large intestine X-ray procedure is performed after a biopsy of the intestinal mucosa.

The air used for the examination may cause a brief sensation of flatulence.