

## Hypertrophic Pyloric Stenosis (HPS) Interventions

The primary goal of caring for the newborn with HPS is to correct electrolyte and fluid balance prior to surgical treatment to relieve the obstruction. Following surgery, the newborn is able to resume a normal feeding schedule within a couple of days.



PLAY PICMONIC

### Treatment

#### Pyloromyotomy

[Pylorus-pie removed by Scalpel](#)

Pyloromyotomy is the standard of treatment and has excellent outcomes. It involves the surgeon cutting through the muscle fibers of the pylorus. This relieves the pyloric contraction, which was obstructing flow of gastric contents to the duodenum.

### Preoperative Care

#### Stabilize Fluid and Electrolyte Balance

[Balancing Fluids and Electric-lights](#)

It is important to stabilize the hydration status and monitor intake and output of the newborn. Furthermore, the fluid and electrolyte imbalances should be corrected and you should administer fluids intravenously (as prescribed) for rehydration. This includes correcting metabolic alkalosis, which can develop from repeated vomiting.

#### Nasogastric Tube

[Nose-stomach Tube](#)

Often, if the newborn has excessive vomiting, an NG tube will be placed to decompress the stomach and relieve its contents.

#### Monitor Feeding

[Monitor Feeding infant](#)

Preoperatively, you should monitor feeding and observe if vomiting occurs. Depending on how far out from surgery the newborn is, they may be prescribed to be NPO.

### Postoperative Care

#### Start Formula or Breastfeeding Within 24 Hours

[Formula and Breastfeeding from 24 Hour Clock](#)

Postoperatively, you should begin small, frequent feedings as prescribed. Mothers may begin formula feedings or breastfeeding within 24 hours of pyloromyotomy.

### **Feedings Every 4-6 hours**

#### **Feeding from (4) Fork (6) Sax**

Gradually, the amount and intervals of feeding should increase. It is recommended that feedings occur every 4-6 hours, and these feedings should include glucose, water, or electrolyte solution. The infant should be fed slowly, burped frequently and the infant should be handled minimally after feedings.

### **Full Feeding Within 2 days**

#### **Full-gauge Feeding by Day (2) Tutu**

The parents should be educated that within 2 days, the infant should have full feeding. This diet should be maintained, and the infant should be monitored for abdominal distention.