

## INTRODUCTION =====

Intestinal obstruction in neonates is an expression which can be applied to a variety of conditions in which there are vomiting, abdominal distension, and failure to pass normal meconium stools in newborn infants. It is observed in approximately 1 of 1500 newborn infants. Its great clinical significance resides in the possible accompanying complications. The loss of gastric, biliary, pancreatic and intestinal secretions rapidly leads to hypovolaemia, dehydration, and acid-base imbalance. Further, the aspiration of the vomitus causes airway obstruction, followed by a chemical and bacterial pneumonia. When abdominal distension is severe, the diaphragm is elevated and respiration is impaired.

This sequence of events can be forestalled by prompt diagnosis, preoperative resuscitation and operation which relieves the obstruction. Early diagnosis rests upon a high index of suspicion among nurses and physicians who care for newborn infants. The investigation necessary is a simple X-ray of the erect abdomen which can be done without upsetting the baby at all. It must be stressed that every baby who has green or persistent vomiting should be considered to have intestinal obstruction until proved otherwise.

The aim of this study is to review the literature concerning intestinal obstruction in neonates as regards presentation, complications, diagnosis and the recent advances in the management of these cases.