

D Case Scenario →

A 72 year old man presents to the emergency department for evaluation of vomiting of blood, dizziness, weakness, black tarry stools he has a history diabetes, coronary artery disease and I.M. He is on aspirin for one year?

DX: - peptic ulcer → gastritis

Symptoms: ① Nausea, vomiting ② loss of appetite
③ Stomach upset and pain ④ pancreas.

D/D ulcer, milroy-weiss, malignancy, gallbladder
MI

Treatment: medical → ① antacid
② PPI ③ Antibiotic
④ H₂ blockers.

Complication:-

Bleeding, stomach ulcer, stomach tumors
pernicious anemia

② case scenario →

DX: esophageal varices due to ↑ ^{cause} increased portal hypertension
throm liver cirrhosis.

D/D → ① milroy weiss x
② peptic ulcer
③ malignancy

Symptoms: vomiting large amount of blood
Black tarry or bloody stools
lightheadedness.

loss of consciousness in severe cases

risk factor →

high portal vein pressure, severe liver failure
and continued alcohol use

Complication →

Bleeding, hypovolemic shock

Management

Don't drink alcohol, Eat healthy diet, healthy weight, reduce risk of hepatitis

* diagnostic by endoscopy.

① medication → Beta blocker to reduce pressure
propranolol

② using elastic bands to tie off bleeding veins

③ Diverting blood flow away from the portal vein called (TIPS)

④ antibiotic to prevent infection.

③ Case scenarios →

DX! Duodenal ulcer

Causes ① Helicobacter pylori ② NSAID

Symptoms ① abdominal pain ② feel very full
③ lose weight

Diagnosis → ① gastroscopy
② blood test ③ Breath test
④ Serological test
⑤ Stool test

TT Triple therapy
① antibiotic ② antacid ③ Anti-inflammatory drugs
④ ↓ alcohol
⑤ ↓ Swallowing
Stop