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PATHOPHYSIOLOGY

UNIT 3

TOPIC :

- **Gastrointestinal system : Peptic Ulcer**



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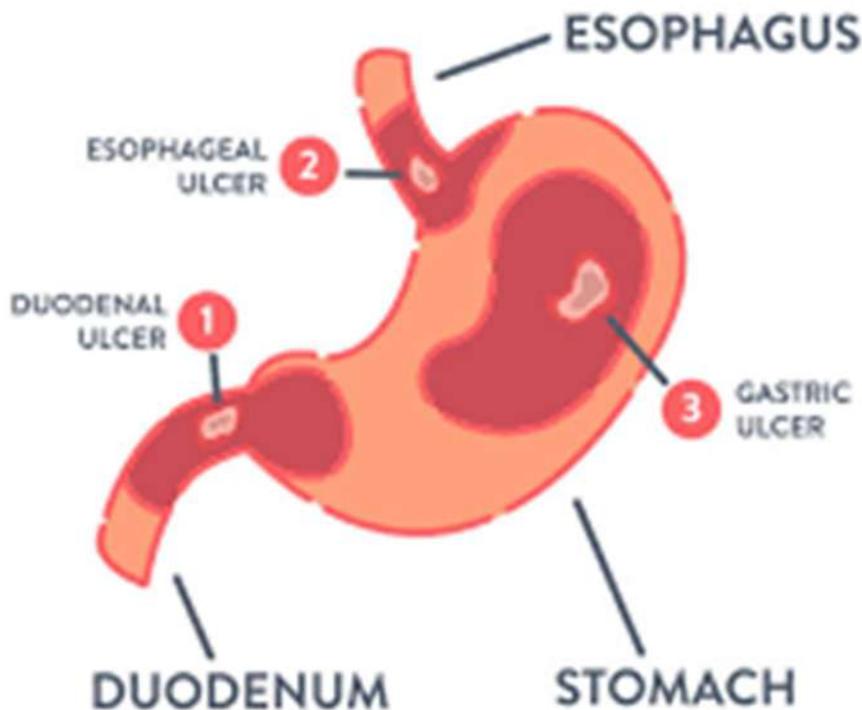
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Gastrointestinal system

Peptic Ulcer Disease

→ Peptic Ulcer is a condition in which a wound / Sore developed on the lining of the Oesophagus , stomach , or small intestine (beginning part of intestine).

PEPTIC ULCER DISEASE



Etiology

- Helicobacter Pylori (it infects and causes inflammation).
- NSAIDs . (Inhibit COX₁)
- Smoking
- Alcoholism
- Radiotherapy

Pathogenesis

Helicobacter pylori release toxin	NSAIDs
Cause Inflammation ↓	Inhibits COX 1 ↓
Damage the defense mechanism ↓	Reduce PG Secretion ↓
ulcer Developed ↓	Decrease Defense Mechanism ↓
	Ulceration Developed

Clinical Manifestations

- ✚ Pain in stomach
- ✚ Gastrointestinal Disorders
- ✚ Heartburn
- ✚ Appetite change
- ✚ Nausea , vomiting
- ✚ Dark or black stool due to bleeding
- ✚ Severe pain

Non Pharmacological Management

- ❖ Diet :
 - Avoiding the foods that take a long time in digestion.
 - If blood or water loss occurred due to Diarrhoea or vomiting , they should be recovered
- ❖ Cessation of NSAIDs.
- ❖ Quitting smoking.

Pharmacological Management

- ◇ **Antacids** : Aluminium hydroxide. magnesium carbonate. ,magnesium trisilicate. magnesium hydroxide. calcium carbonate. sodium bicarbonate.
- ◇ **H₂ Blocker** : cimetidine (Tagamet) , ranitidine (Zantac)** nizatidine (Axid) famotidine (Pepsid)
- ◇ **PPI** : Omeprazole ,Esomeprazole ,Lansoprazole , Rabeprazol e Pantoprazole.
- ◇ **Protective Drugs** : Carafate (Sucralfate) Pepto- Bismol (Bismuth Subsalicylate). It covers the wound and prevent further damage)
- ◇ **Antibiotics** : Imidazole , azithromycine , amoxicillin etc.

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