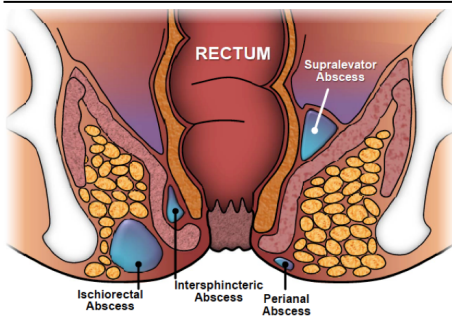


# 24 GIT

## ABSCESS



## RECTAL BLEEDING

- |                            |                                  |
|----------------------------|----------------------------------|
| < 50yo                     | > 50yo                           |
| - Haemorrhoids             | - Diverticulosis/itis            |
| - Anal fissure             | - <b>Angiodysplasia (common)</b> |
| - Benign polyps            | - Bowel Ca                       |
| - IBD                      | - Colitis                        |
| - Local trauma             | - Aortoenteric fistula           |
| - Infection incl Proctitis | - Other malignancy               |

## PANCREATITIS

- Causes**
- |                     |              |                   |
|---------------------|--------------|-------------------|
| - Alcohol           | - Trauma     | - Penetrating PUD |
| - Gallstones        | - T2DM       | - Ca, Lipids      |
| - Iatrogenic (ERCP) | - Hereditary | - Vasculitis      |
| - Idiopathic        |              |                   |

**Criteria**  
APACHE II most predictive of severity, but complicated

**Modified Glasgow Criteria**  
**PANCREAS**, ≥ 3 = severe

PaO <sub>2</sub> < 60	Renal (urea) > 16
Age > 55	Enzymes (LDH, AST) > 600, 200
Neut (WCC) > 15	Alb < 32
Ca < 2	Sugar > 10

**Ransons Criteria**  
ANES from PANCREAS

On admission	At 48hrs
Age > 55	Packed cell volume > 10% admission
WCC > 16	Urea ↑ > 1.8
BSL > 11	Ca < 2
LDH > 350	PaO <sub>2</sub> < 60
AST > 250	BE > 4
	Fluid Sequ > 6L

- Management**
- NBM, nutritional support, NGT, IVF (lots)
  - **Anticipate DIC**
  - Mx cause eg cholecystectomy, etoh intervention

- Complications**
- Shock
  - Infection 10%
  - ARDS Day 3-7
  - Pseudocyst
  - Chronic
  - Death 5%

## CHOLECYSTITIS

- USS**
- 90% sens 80% spec (CT worse)
  - Findings:
    - **Wall > 4mm thick**
    - Stones
    - Gas in biliary tree
    - Pericholic fluid
  - **Charcot Triad:** pain, jaundice, high fevers

- Management**
- NBM/IVF
  - ABx: **Amp 2g & Gent 4-6mg/kg**
  - Lap choly or perc drain
  - Analgesia

## CHOLELITHIASIS

- 80% chol (others incl bile pigment from haemolysis)
- Disease of the west
- ♀ > ♂ esp with oestrogen eg pregnant, OCP
- RF: age, obesity, DM, rapid weight loss, genetics, ↑ chol
- Complications: Cholecystitis, pancreatitis, obstructive jaundice, GN sepsis, ileus, perforation

## BOWEL OBSTRUCTION

- Causes**
- |                             |                    |
|-----------------------------|--------------------|
| <b>Small Bowel</b>          | <b>Large Bowel</b> |
| - <b>Adhesions</b> (common) | - Tumours          |
| - Congenital malformation   | - <b>Volvulus</b>  |
| - Hernia                    | - Faecal impaction |
| - Crohn's                   | - Diverticulitis   |
| - <b>Intussusception</b>    |                    |
| - Tumours                   |                    |

- SMA syndrome
- Volvulus**
- 10% of all large bowel obstructions
- Sigmoid: Caecal = 2:1
- Sigmoid:
  - older
  - often strangulated, 90% recurrence
  - Mx: **rectal tube decomp 90% success**
- Caecal
  - Young, **pregnant**
  - Presents like SBO
  - High risk of perforation

## APPENDICITIS

**Alvarado scoring system**

MANTRELS	Score	Interpretation
Migrating pain	1	< 5 Unlikely
Anorexia	1	5-6 Likely
N&V	1	7-8 Probably
Tenderness RIF	2	> 8 Very probably
Rebound	1	
Elevated T > 37.3	1	
Leucocytosis > 10	2	
Shift Left 75% neutrophils	1	

## COLITIS

- Ischaemic Colitis**
- Pain out of proportion
  - 50% mortality
  - Usually **SMA thrombus**
- Causes**
- Arterial: embolus, thrombus, dissection, AF
  - Venous: hyper-visc, pro-coag, hypothermia, pancreatitis, diverticulitis
  - Other: obstruction, hernia, CCF, Dialysis

- Management**
- Analgesia
  - **Triple ABx**
  - NBM/IVF
  - Art: surgery, angio
  - Venous cause: **heparin** infusion, angio

- Toxic Megacolon**
- Risk Factors**
- IBD: UC/CD
  - C diff
  - Isch Colitis
- Dx**
- > 6cm on Axr, loss of haustra
  - Clinically toxic

- Mx**
- **Tazosin**
  - Fluids
  - Colectomy if conservative fails
  - High mortality without treatment

## HERNIA

- Inguinal**
- most common: lifetime incidence 25% M 5% F
  - cough impulse **ABOVE pubic tubercle**
- Indirect**
- Female common
  - Through inguinal canal **∴ easier to incarcerate**
  - Into scrotum
- Direct**
- Older people
  - Through weakness in muscle = less complications

- Femoral**
- 20% of all hernias in females, 1% males
  - older people
  - **Most complications**

## OESOPHAGEAL FB

- Cxr: GIT FB on AP (coronal), Resp on Saggital
- Indications for endoscopy**
- Airway comp
- Button battery stuck
- Perforation
- Complete obstruction
- Sharp/long
- Multiple FB
- Coin @ cricopharynx
- Not cleared > 24hrs

- Food Impaction**
- **Glucagon 1-2mg IV**
  - **GTN 600 mcg SL**
  - Endoscopy

## ABDO PAIN IN KIDS

- |                               |                              |
|-------------------------------|------------------------------|
| <b>Neonates</b>               | <b>Infants/Preschool</b>     |
| <b>Hirschsprungs***</b>       | <b>Appendicitis***</b>       |
| <b>Incarcerated hernia***</b> | Gastroenteritis              |
| Meckel's                      | Constipation                 |
| Irritable/Unsettled           | Pneumonia                    |
| <b>Intussusception</b>        | <b>Intussusception</b>       |
| <b>UTI</b>                    | <b>UTI</b>                   |
| <b>Volvulus***</b>            | <b>Volvulus***</b>           |
| Necrotizing enterocolitis     |                              |
| <b>School Age</b>             | <b>Adolescents</b>           |
| <b>Appendicitis***</b>        | <b>Appendicitis***</b>       |
| <b>Gastroenteritis</b>        | <b>Gastroenteritis</b>       |
| <b>DKA</b>                    | <b>DKA</b>                   |
| <b>UTI</b>                    | <b>UTI</b>                   |
| <b>Viral illness</b>          | <b>Viral illness</b>         |
| <b>Testicular torsion***</b>  | <b>Testicular torsion***</b> |
| <b>Ovarian pathology***</b>   | <b>Ovarian pathology***</b>  |
| HSP                           | PID                          |
| Mesenteric adenitis           | IBD                          |
| Migraine                      | <b>Ectopic pregnancy***</b>  |
| Pneumonia                     | Pancreatitis                 |
| Constipation                  | Renal Colic                  |
|                               | Cholecystitis/lithiasis      |
|                               | Pancreatitis                 |

- \*\*\*Time critical illness**
- Bowel obstruction in kids**
- Post-surgical adhesions
  - Malrotation: 0-3m, bilious vomiting
  - Pyloric stenosis: 2-6wks, projectile vomiting
  - Intussusception: 3m-6y, sausage RUQ, **USS donut sign**

- Pyloric Stenosis**
- 2-8wks of life
  - Protracted vomiting/hungry → electrolyte dysfunction
  - ex: gastric distension, peristaltic waves, non-tender olive mass midline/RUQ
  - Ix USS (gold standard), Ba swallow if no USS

- Intussusception**
- Most common cause bowel obstruction
  - 3m-3y (peak 5-10m)
  - Early signs: **colicky** pain/distress
  - Late signs: bilious emesis, **red currant stool**, lethargy
  - Iliocolic 90%
  - Causes:
    - Idiopathic
    - Meckel's
    - CF
    - Viral illness
    - Sutures/staples
    - HUS
    - HSP
    - Lymphoma/Leukaemia
    - Tumour

- Complications: perforation, dehydration, electrolyte imbalance, bowel ischaemia/infarct
- X-ray findings:
  - paucity of air RUQ
  - R sided soft tissue mass
  - Intracolonic mass
  - Dilated small bowel
  - Collapse of bowel distally
- Contrast x-ray:
  - coiled spring sign
  - meniscus sign
  - dissection sign
- Ultrasound findings:
  - transverse = donut sign
  - long = pseudo kidney sign
- RF for perforation:
  - < 3m or > 5y
  - > 48hr sx
  - PR bleeding
  - Sig dehydration
  - SBO
  - Dissection sign on contrast xr

- Meckel's**
- Rule of 2s*
- 2% population
  - 2 ft prox to IC valve
  - 2 inch long
  - 2 types of ectopic tissue: gastric, pancreatic
  - 2:1 ♂:♀

- Constipation**
- causes
    - Anal anomalies eg stenosis, stricture, **fissure**
    - Spinal anomalies eg sacral agenesis
    - Hirschsprungs
    - Hypothyroidism
    - Metabolic: ↓K, ↑Ca
    - Coeliac disease
    - Cows milk intolerance
    - Drugs & Tox: Pb toxicity
    - Intellectual impairment
    - Child abuse
    - CF
    - Diet
    - Psychogenic