



มหาวิทยาลัยราชภัฏนครปฐม



4172701 Adult Nursing 1

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Learning outcomes



- Describe patients with abnormalities in the gastrointestinal system.
- Describe Pathology, signs and symptoms of patients with abnormalities in the gastrointestinal system.
- Describe treatment in patients with abnormalities in the gastrointestinal system.
- Describe nursing diagnosis and nursing care in patients with abnormalities in the gastrointestinal system.

Gastrointestinal disorders: overview

GI disease

- CA esophagus
- gastric ulcer
- UGIB
- PU Perforate
- gastroesophageal reflux
- Appendicitis
- Peritonitis
- intestinal diverticulum
- GI obstruction
- hernia

procto disease

- ulcerative colitis
- CA colon
- anal fistula
- hemorrhoid

Gastrointestinal disorders



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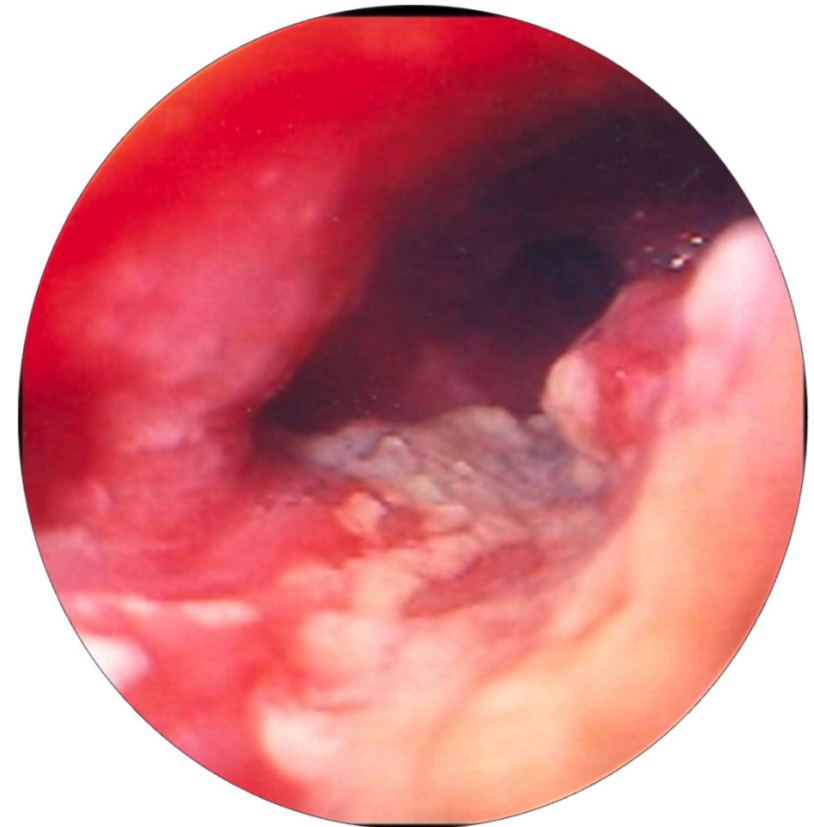
Part 1 GI disorders

CA esophagus

The proximal 2/3 of the esophagus is squamous cell carcinoma; the distal 1/3 is adenocarcinoma.

risk factors

- Alcohol ingestion
- Tobacco use
- Gastroesophageal reflux disease
- Obesity
- Older age
- Male sex
- Barrett esophagus
- Genetic syndromes



CA esophagus

Signs



Pressure on Chest



Difficult to Swallow

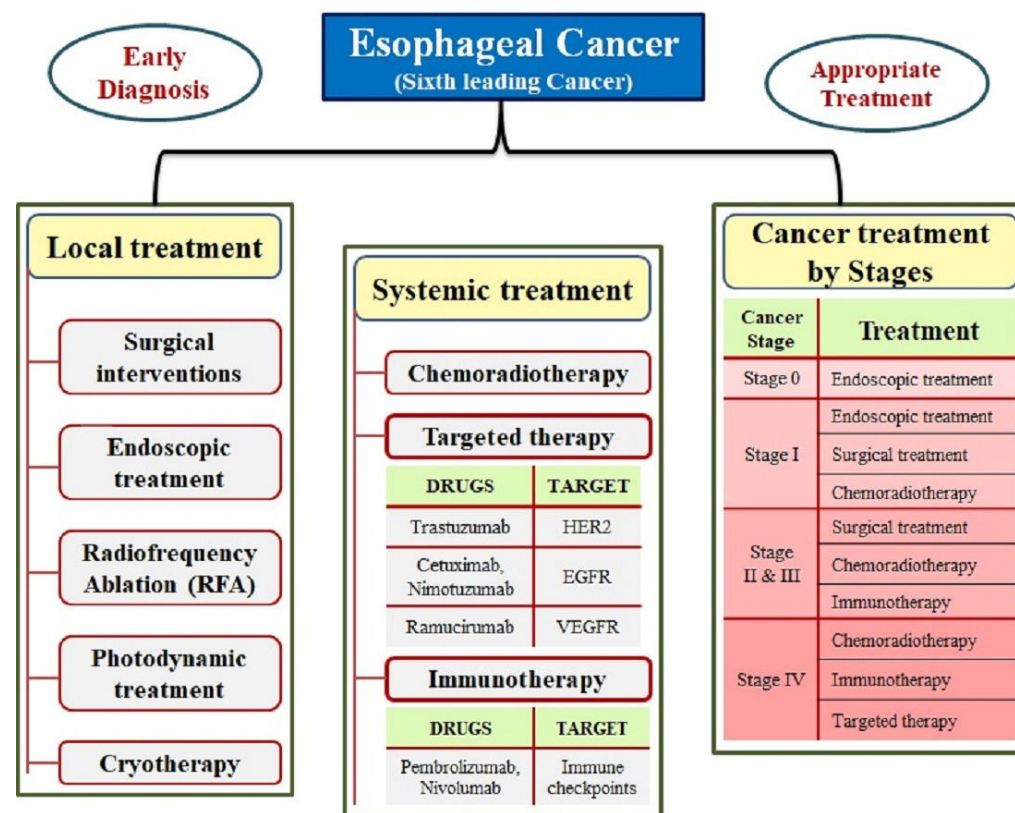


Indigestion and Heartburn



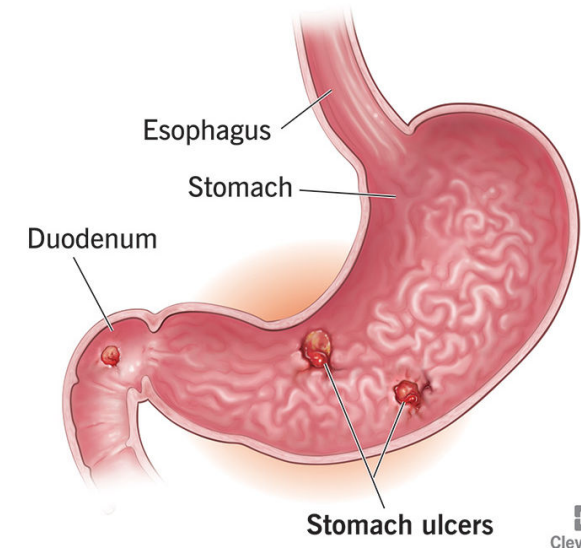
Weight Loss

Treatment



gastric ulcer

- A peptic ulcer is an erosion in a segment of the gastrointestinal mucosa, that penetrates through the muscularis mucosae.
 - gastric ulcer: in the stomach
 - duodenal ulcer: first few centimeters of the duodenum
- Caused:
 - *H. pylori* and NSAIDs
 - Severe physiological stress
 - Zollinger-Ellison syndrome.
 - smoking, alcohol use and other medications



gastric ulcer

Signs

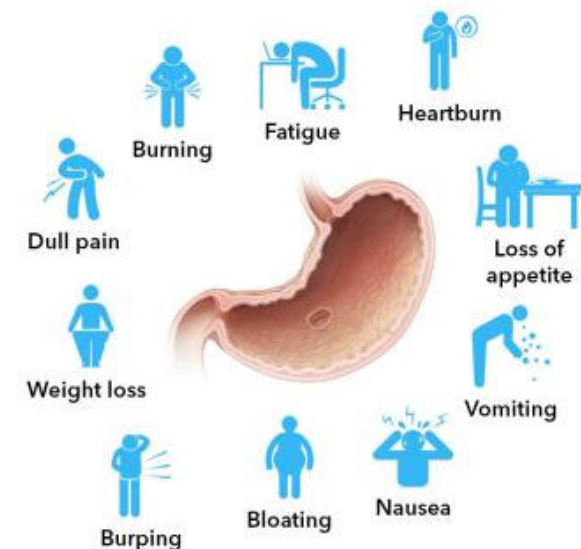
- **Gastric ulcer** :symptoms often do not follow a consistent pattern, pyloric channel ulcers, which are often associated with symptoms of obstruction.
- **Duodenal ulcers** tend to cause more consistent pain

Complications

- gastrointestinal hemorrhage
- perforation
- Gastric outlet obstruction
- Stomach cancer

Treatment:

- Antibiotics for H.pylori
- Cytoprotective agents
- H2 blockers
- PPIs

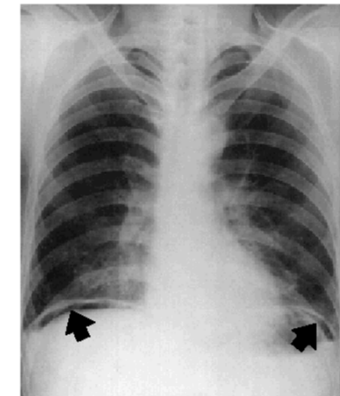


PU Perforate

Perforated peptic ulcer is a serious complication of PUD, which triad of sudden onset of abdominal pain, tachycardia and abdominal rigidity.

MANAGEMENT

- prompt resuscitation
- intravenous antibiotics
- Analgesia
- proton pump inhibitory medications
- nasogastric tube
- urinary catheter
- surgical;exploratory laparotomy and omental patch repair, Laparoscopic surgery,Gastrectomy



pneumoperitoneum

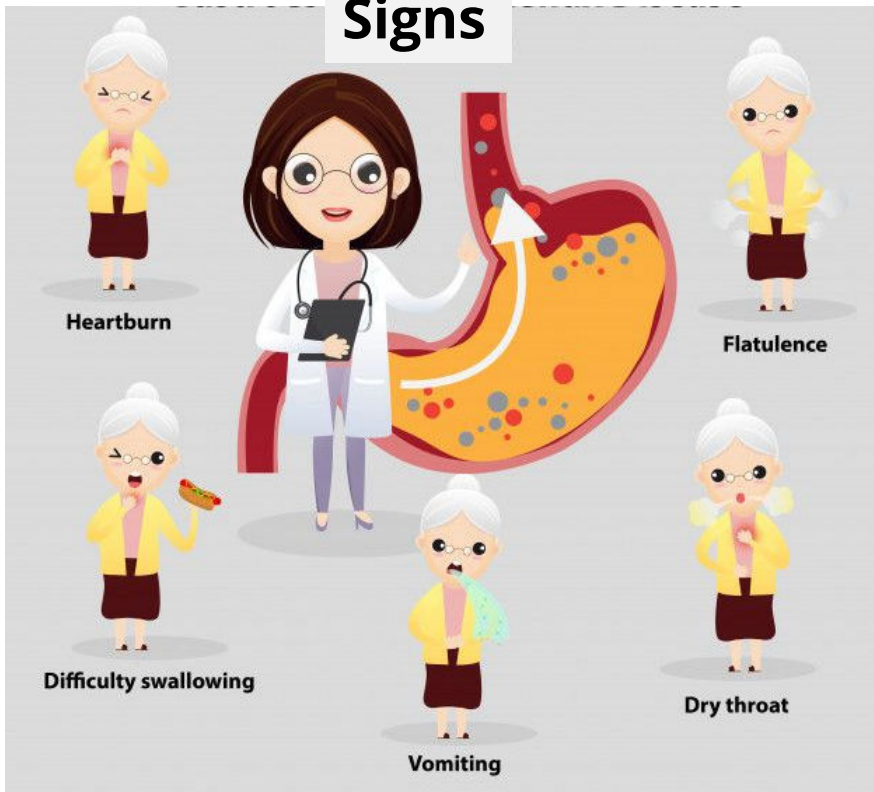
gastroesophageal reflux

GERD: Incompetence of the lower esophageal sphincter allows reflux of gastric contents into the esophagus, causing burning pain. Prolonged reflux may lead to esophagitis, stricture, and rarely metaplasia or cancer.



gastroesophageal reflux

Signs



<https://short.npru.ac.th/b3i>

Treatment

Lifestyle Changes to Help Treat GERD



<https://short.npru.ac.th/b3k>

upper gastrointestinal bleeding

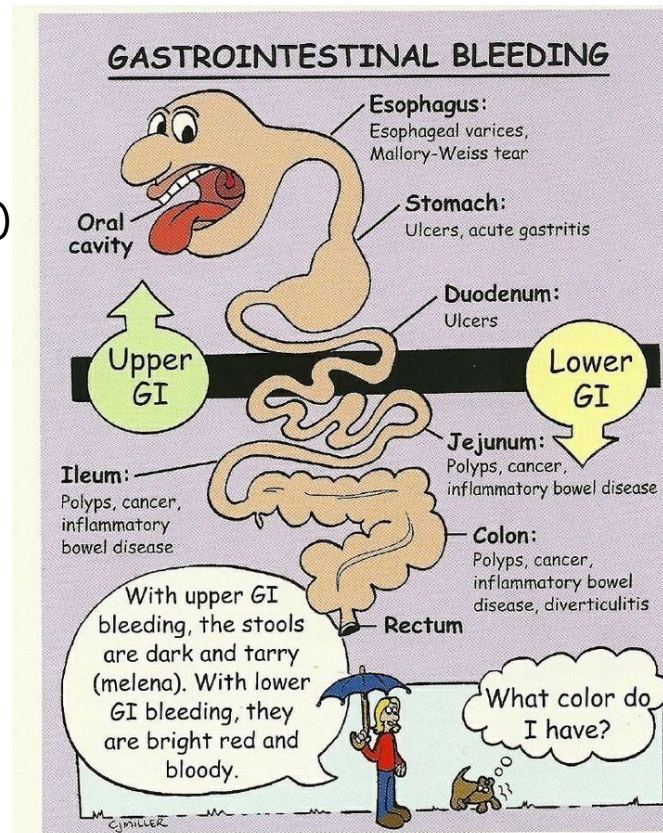
Gastrointestinal (GI) bleeding can originate anywhere from the mouth to the anus.

UGIH
(Bleeding upon the ligament of treitz)

Hematemesis

Melena

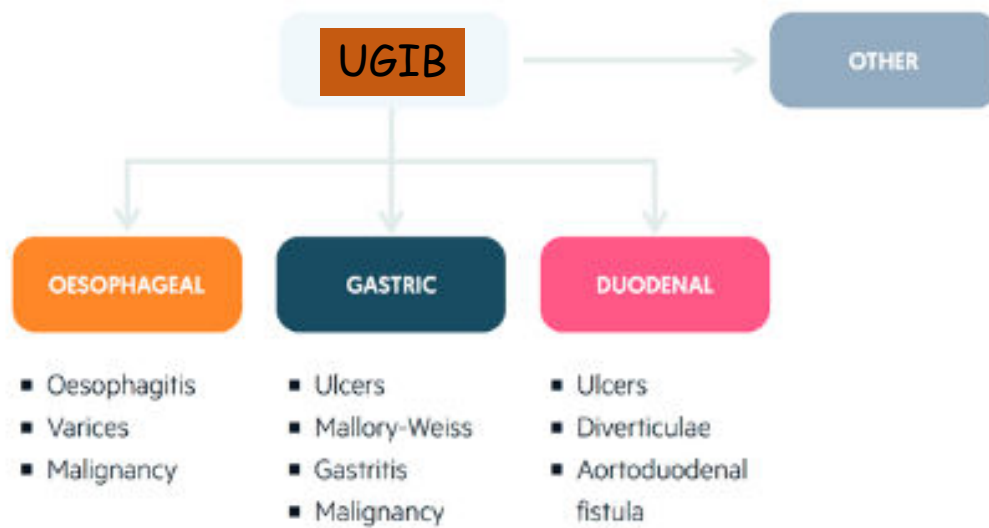
Coffee ground



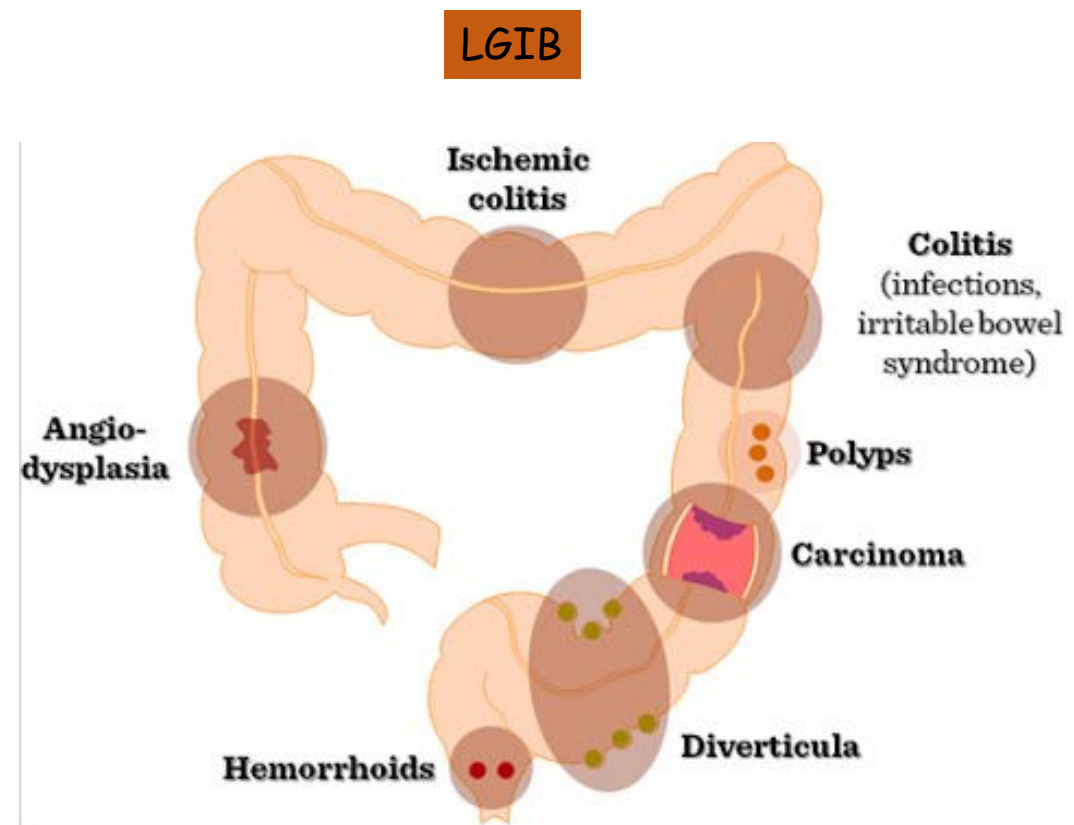
LGIH
(Bleeding below the ligament of treitz)

Hematochezia

upper gastrointestinal bleeding



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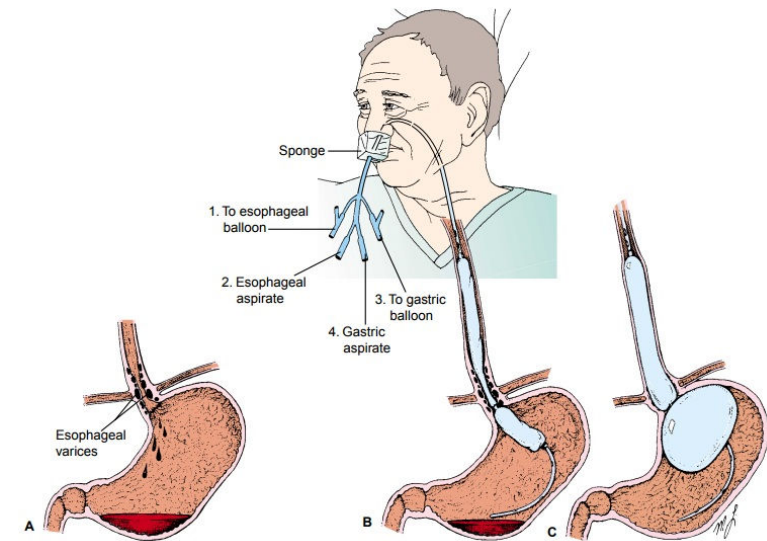


<https://short.npru.ac.th/b3m>

upper gastrointestinal bleeding

Treatment

- Secure airway
- IV fluid resuscitation
- Blood transfusion
- Medications: IV PPIs, Octreotide
- Endoscopic, TIPS, Balloon tamponade
- Surgery: Suture bleeding point, Vagotomy, Gastrectomy(Billroth I, II)







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