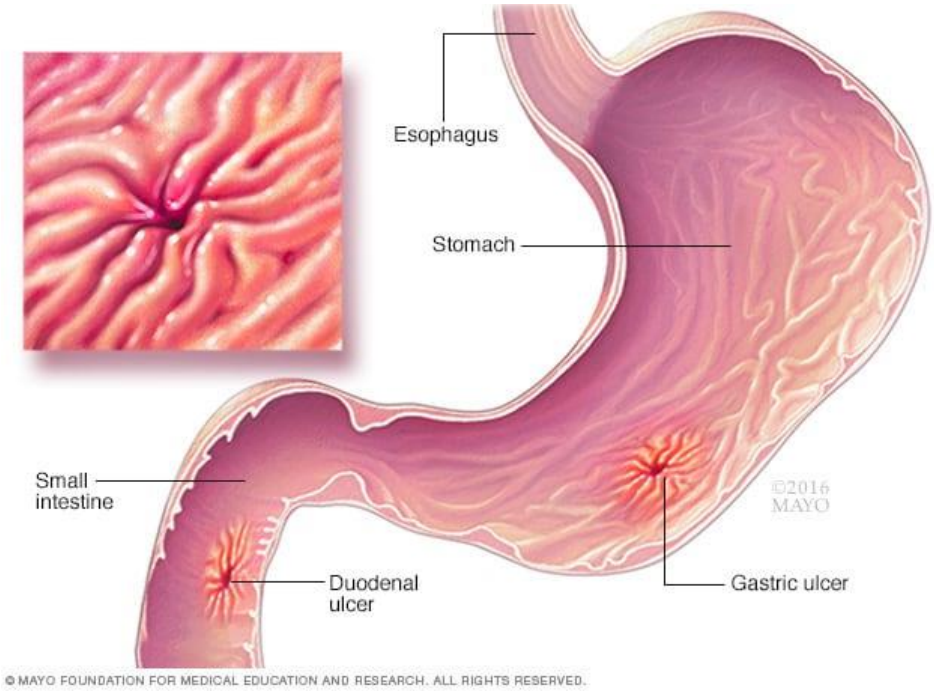
Peptic ulcer

A peptic ulcer is **a sore on the lining of your stomach, small intestine or esophagus**. A peptic ulcer in the stomach is called a gastric ulcer. A duodenal ulcer is a peptic ulcer that develops in the first part of the small intestine (duodenum). An esophageal ulcer occurs in the lower part of your esophagus.



Peptic ulcers are open sores that develop on the inside lining of your stomach and the upper portion of your small intestine. The most common symptom of a peptic ulcer is stomach pain.

Peptic ulcers include:

- **Gastric ulcers** that occur on the inside of the stomach
- **Duodenal ulcers** that occur on the inside of the upper portion of your small intestine (duodenum)

Etiology

The most common causes of peptic ulcers are infection with the bacterium Helicobacter pylori (H. pylori)

Long-term use of nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Advil, Motrin IB, others) and naproxen sodium (Aleve). Stress and spicy foods do not cause peptic ulcers. However, they can make your symptoms worse.

Other medications. Taking certain other medications along with NSAIDs, such as steroids, anticoagulants, low-dose aspirin, selective serotonin reuptake inhibitors (SSRIs), alendronate **(Fosamax) and risedronate (Actonel), can greatly increase the chance of developing ulcers.**

Symptoms

- Burning stomach pain
- Feeling of fullness, bloating or belching
- Intolerance to fatty foods
- Heartburn
- Nausea
  - Vomiting or vomiting blood — which may appear red or black
  - Dark blood in stools, or stools that are black or tarry
  - Trouble breathing
  - Feeling faint
  - Nausea or vomiting
  - Unexplained weight loss
  - Appetite change

Risk factors

- **Smoke.** Smoking may increase the risk of peptic ulcers in people who are infected with H. pylori.
- **Drink alcohol.** Alcohol can irritate and erode the mucous lining of your stomach, and it increases the amount of stomach acid that's produced.
- **Eat spicy foods.**

Alone, these factors do not cause ulcers, but they can make ulcers worse and more difficult to heal.

Complications

Left untreated, peptic ulcers can result in:

- **Internal bleeding.** Bleeding can occur as slow blood loss that leads to anemia or as severe blood loss that may require hospitalization or a blood transfusion. Severe blood loss may cause black or bloody vomit or black or bloody stools.
- **A hole (perforation) in your stomach wall.** Peptic ulcers can eat a hole through (perforate) the wall of your stomach or small intestine, putting you at risk of serious infection of your abdominal cavity (peritonitis).
- **Obstruction.** Peptic ulcers can block passage of food through the digestive tract, causing you to become full easily, to vomit and to lose weight either through swelling from inflammation or through scarring.
- **Gastric cancer.** Studies have shown that people infected with H. pylori have an increased risk of gastric cancer.

Non Pharmacological management

- **Protect from infections.** It's not clear just how H. pylori spreads, but there's some evidence that it could be transmitted from person to person or through food and water.
- **Use caution with pain relievers.** regularly use pain relievers that increase of peptic ulcer, take steps to reduce your risk of stomach problems. For instance, take medication with meals.

Diagnosis

Endoscopy

an upper endoscopy to determine an ulcer. In this procedure, the doctor inserts an endoscope (a small, lighted tube with a tiny camera) through throat and into stomach to look for abnormalities.

***H. Pylori* tests**

Tests for *H. pylori* are now widely used and can also look for it with a blood or stool test, or by taking a sample during an upper endoscopy.

Imaging tests

Less frequently, imaging tests such as X-rays and CT scans are used to detect ulcers. Patient has to drink a specific liquid that coats the digestive tract and makes ulcers more visible to the imaging machines.

MANAGEMENT AND TREATMENT

For most people, ulcers are treated with medications, including:

- **Proton pump inhibitors (PPI):** These drugs reduce acid, which allows the ulcer to heal. PPIs include Prilosec®, Prevacid®, Aciphex®, Protonix® and Nexium®.
- **Histamine receptor blockers (H2 blockers):** These drugs also reduce acid production and include Tagamet®, Pepcid®, Zantac® and Axid®.
- **Antibiotics:** These medications kill bacteria. Doctors use them to treat *H. pylori*.
- **Protective medications:** Like a liquid bandage, these medications cover the ulcer in a protective layer to prevent further damage from digestive acids and enzymes.