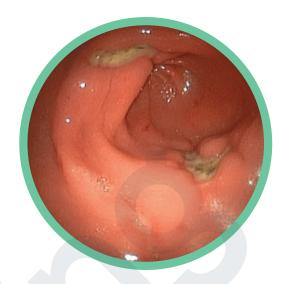
PEPTIC ULCER DISEASE PATHOCHART

PATHOPHYSIOLOGY

Defects (open sores) in the protective lining of the stomach and upper small intestine. Gastric ulcers occur on the inside of the stomach and duodenal ulcers occur on the inside of the upper portion of the small intestine (duodenum). These ulcers at at risk for bleeding. Common causes include chronic NSAID use, H.Pylori infection, and chronic alcohol use



By Herbert L. Fred, MD and Hendrik A. van Dijk http://cnx.org/content/m14904/latest/, CC BY 2.0, https://commons.wikimedia.org/w/index.php?curid=5038484

ASSESSMENT FINDINGS

- Epigastric pain (gnawing or burning) after meals Heartburn
- Constipation
- Feeling full
- Unexplained weight loss

- Dysphagia
- Bleeding, tarry stools
- Anemia
- Vomiting
- Hypovolemia

DIAGNOSTICS

Upper endoscopy

Tissue biopsy

NURSING PRIORITIES

- Optimize Nutrition
- Promote Comfort

Monitor for Bleeding

THERAPEUTIC MANAGEMENT

- Monitor coagulation and blood counts
- Antibiotic therapy for H. Pylori
- Avoid acid and gas-producing foods

- Eat small, frequent meals
- Smoking cessation
- Avoid alcohol and stress

MEDICATION THERAPY

- Proton pump inhibitor
- H2 Histamine blockers
- Antacids

- Cytoprotective agents (Sucralfate)
- Antibiotics
- AVOID NSAIDS

