

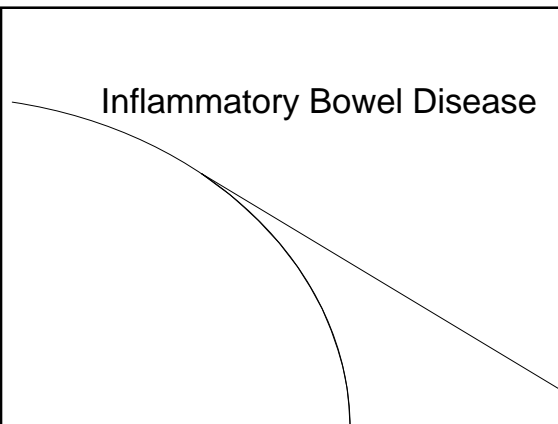
NURS 821 Gastrointestinal Disorders

Lecture 8 Part 4 Disorders of the Intestines

Malabsorption: Manifestations and Pathophysiology

- 1. Weight loss and malnutrition
- 2. Diarrhea
- 3. Steatorrhea
- 4. Flatulence, abdominal distension
- 5. nocturia
- 1. Impaired absorption: carbo., fat, protein
- 2. Excess fluid electrolytes into colon overwhelm absorption
- 3. Excess fat content
- 4. Undigested lactose-gas, osmotic
- 5. Delayed water absorption and excretion

Inflammatory Bowel Disease



Irritable Bowel Syndrome

- Definition-functional digestive disorder caused by overly sensitive intestines which respond to food, gas, and stress with muscle spasms.
- Incidence-affects all ages
- Manifestations-abdominal pain, bloating, gas, diarrhea, constipation (NIDDK, 2002)

IBS



- Pediatric Manifestations
- Usually diarrhea or pain predominant
 - D predominant under age 3
 - Usually painless, alternating with constipation
 - <5 watery, soft stools/day
 - Periumbilical pain
 - Pain predominant after 5
 - Lower left abdominal crampy
 - Pain increases w/ eating; decreases w BM or flatulence
 - (NIDDK, 2002)

IBS Manifestations

- Triggered (not caused by) stressful events (school, teething, flu, home problems)
- Mucus in stool
- HA
- Nausea
- May lose weight if avoiding eating
- (NIDDK, 2002)



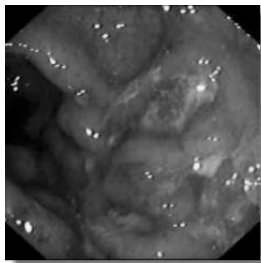
Crohn's Disease (Ileitis or Enteritis)

- Pathophysiology-
 - Inflammatory bowel disease due to immune reactivity to a virus or bacterium
 - usually affecting the ileum but can inflame from the mouth to the anus
 - Affected cells produce TNF
 - Free radicals potentiate inflammation
- Incidence-M=F, family history

Crohn's Disease

- Manifestations-Episodic with remissions
 - RLQ abdominal pain
 - D
 - rectal bleeding (may be serious)
 - wt. Loss
 - Fever
 - Children may have delayed development and stunted growth.

Crohn's Disease



Complications of Crohn's Disease

- Intestinal obstruction
 - Inflammation and scarring
- Abscess formation
- fistulas
- Infection
- Nutritional deficiencies-malabsorption, intestinal protein loss, poor intake
- Arthritis
- Skin problems
- Eye and mouth inflammation
- Renal calculi
- Cholelithiasis
- (NIDDK, 2002)

Colitis

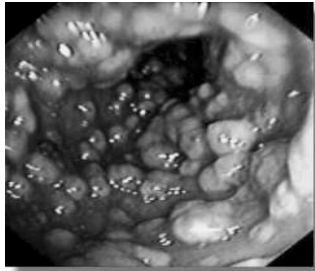
- Definition-Episodic inflammatory disease of mucous membrane of the colon, affecting isolated continuous segments or entire colon
- Incidence
 - Increased between 15-35 years
 - Increased in caucasians
- Etiology-unknown
 - Familial tendency
 - autoimmune association with antibody to colonic epithelial cells



Phases of Ulcerative Colitis

- Acute-
 - hyperemic, edematous colon mucosa with diminished secretions, mucosal hemorrhages, and abscesses
 - Mucosal sloughing into feces
 - Ulcerations confined to mucosa and submucosa with large denuded areas of colon
- Chronic
 - Ulcerations become fibrotic with bowel wall thickening
 - Obstruction rare

Colitis



U.C. Complications

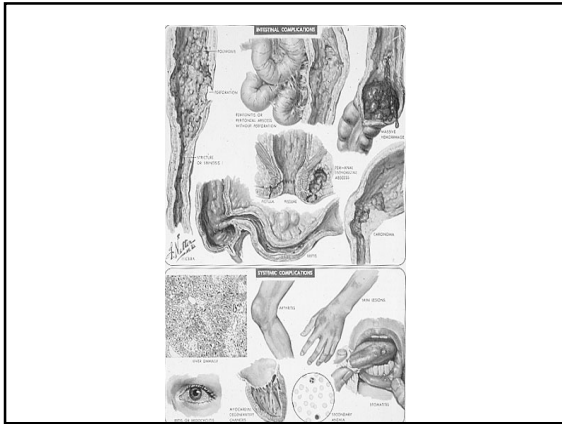
- Intestinal obstruction
- Dehydration
- Malabsorption
- Anemia
- Colon cancer



U.C. Manifestations

- | | |
|---------------------------|-------------------------|
| • Variable | • Weight loss |
| • Cramping abdominal pain | • Hypoalbuminemia |
| • Bloody diarrhea | • Anemia |
| • Fever | • Leukocytosis |
| | • Electrolyte imbalance |





Differential of Ulcerative Colitis and Crohn's Disease

- | | |
|--|---|
| <ul style="list-style-type: none"> ● Ulcerative Colitis ● Mucosa, submucosa ● Not granulomatous ● 95% rectal ● small bowel normal ● Right colon occasional ● Continuous lesions to rectum ● Malignancy-high > 10 years ● Complications-rare strictures, fistula | <ul style="list-style-type: none"> ● Crohn's Disease ● Transmural ● Granulomatous inflammation-common ● 50% rectal ● 80% small bowel ● Right colon frequent ● Lesions-discontinuous, skip, cobblestone ● Malignancy-low ● Complications-strictures, fissures, abscesses |
|--|---|

Diverticulitis

