

PEPTIC ULCER DISEASE

- ◆ WHAT IS A PEPTIC ULCER AND WHERE DOES IT OCCUR?
 - ◆ Peptic ulcers are craters or open sores in the lining of the upper gastrointestinal tract. They include duodenal ulcers (those that are located in the top of the small intestine or duodenum) and gastric ulcers (those found in the stomach).
 - ◆ Peptic ulcers are common and usually occur singly. But it is possible to have two or more, or even both duodenal and gastric ulcers at the same time. Duodenal ulcers are more common than gastric ulcers.

- ◆ WHAT CAUSES PEPTIC ULCERS?
 - ◆ Peptic ulcers are caused by acid and pepsin (an enzyme) produced in the stomach. Patients who develop ulcers often produce greater amounts of acid than people without ulcers. Also, the ulcer patient may not have strong enough natural defenses in the stomach or intestinal wall to resist the effect of acid and pepsin.
 - ◆ Doctors do not yet know all the reasons too much acid is produced, but many believe the key to healing an ulcer is to control the amount of acid produced.

- ◆ WHAT ARE THE SYMPTOMS OF PEPTIC ULCER DISEASE?
 - ◆ Duodenal Ulcer symptoms:
 1. Pain that awakens patients from sleep
 2. Burning or gnawing sensation in the upper abdomen
 3. Pain in the back, lower abdomen or chest area may occasionally occur
 4. Pain that occurs when the stomach is empty (about two hours after a meal or during the night). Relief frequently occurs after eating

 - ◆ Gastric Ulcer symptoms:
 1. Gastric ulcer pain may be less severe than duodenal ulcer pain and is noticeably higher in the abdomen
 2. Eating may increase pain rather than relieve pain
 3. Pain is described as aching, nagging, cramping or dull
 4. Other symptoms may include nausea, vomiting and weight loss

- ◆ Some ulcers may produce no symptoms at all. However, occasional painless bleeding, anemia (low blood count), or the passage of black, tarry stool may be the first sign of peptic ulcer disease.

◆ HOW ARE PEPTIC ULCER DIAGNOSED?

- ◆ Diagnosis can often be made from the patient's symptoms.
- ◆ X-ray – your doctor may have you drink barium, a chalky liquid that shows up on an x-ray and outlines your stomach and duodenum. The ulcer can be diagnosed by an indentation in the stomach or duodenal wall. You may still have an ulcer even though the x-ray fails to show it.
- ◆ Endoscopy – this is a more accurate method of diagnosing ulcer disease. This exam allows the doctor to look into your stomach and duodenum with a lighted flexible tube. Gastric ulcers, unlike duodenal ulcers, can occasionally be cancerous. Therefore, endoscopy and biopsy of the gastric ulcer are commonly used for the diagnosis and follow-up of ulcers.

◆ WHAT ARE THE COMPLICATIONS?

- ◆ If ulcers remain untreated they may lead to:
 - ◆ Bleeding
 - ◆ Perforation (an actual puncture through the stomach)
 - ◆ Obstruction (repeated attacks may cause scar tissue that can block the digestive tract)

◆ IMMEDIATELY REPORT TO YOUR DOCTOR...

- ◆ Any signs of bloody or black, tarry stools (digested blood)
- ◆ Vomiting of blood or “coffee ground” material
- ◆ Pain
- ◆ Fever

◆ HOW CAN YOU TREAT PEPTIC ULCER DISEASE?

- ◆ Medications – medications that decrease the amount of acid produced by the stomach are used to provide quick pain relief and promote rapid healing.
- ◆ Other equally effective medications, such as coating agents called carafate, antacids, and one called omeprazole, are available.

- ◆ Most peptic ulcers heal within 4 to 6 weeks of treatment. Take your medications regularly as directed, otherwise your ulcer may not heal completely and your symptoms could return. Symptoms may disappear in a few days, but DO NOT STOP taking your medication.
- ◆ Nighttime is the most important time to heal ulcers, since many people produce large amounts of stomach acid while they sleep. Take antacids as needed between meals and at bedtime to neutralize stomach acid and reduce pain.
- ◆ Aspirin and anti-inflammatory products should be avoided. Let your doctor know if you have been taking these, so alternate medications may be prescribed.
- ◆ Side effects from the medication used to treat peptic ulcer disease are very infrequent (less than 5 percent), but many include mild diarrhea, dizziness, nausea, drowsiness, rash or headache.
- ◆ Remember, people are different and no single medicine is best for everyone. If your symptoms worsen, notify your doctor immediately.

◆ DIET

- ◆ The best diet to follow is a balanced nutritious one. Frequent meals and milk diets actually stimulate acid and can be less helpful. Avoid eating at least two hours before bedtime. Avoid whatever foods might cause discomfort, such as alcohol, caffeine beverages (coffee and pop), fatty foods, and highly seasoned foods.

◆ LIFE-STYLE CHANGES

- ◆ It is important to try to stop smoking, since smoking has been linked to ulcer formation, reduced healing, and ulcer recurrences.
- ◆ Also try to minimize stress in your life. Stress may worsen ulcer symptoms.
- ◆ Patients with a history of peptic ulcer disease may have frequent recurrences during their lifetime. Follow your doctor's advice to minimize the frequency and severity of recurrences. Promptly report any return of symptoms.
- ◆ If you have repeated occurrences of peptic ulcer disease, your doctor may use maintenance therapy and prescribe a low dose medication to minimize the risks and prevent painful symptoms.