## Inflammatory Disease of Stomach



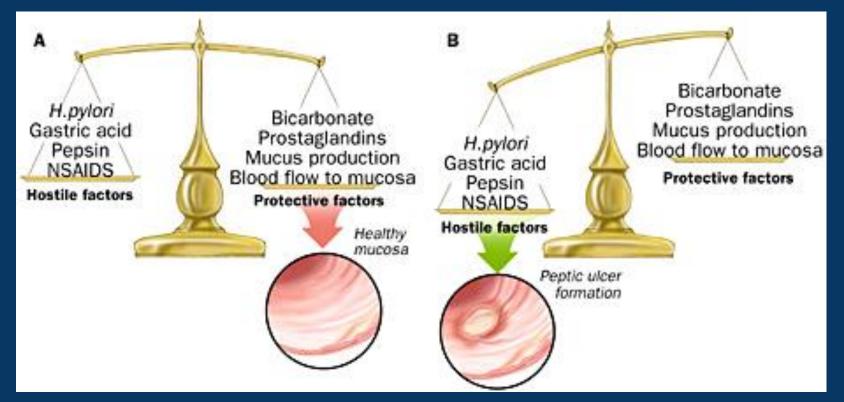
# **Objectives**

- LO1:Definition of gastritis
- LO2:Pathophysiology of each types of gastritis
- LO3: Etiology of gastritis
- LO4:Types gastritis
- LO5:Staging of each type of gastritis
- LO6:Clinical features of gastritis

### **Definition:**

- The term <u>gastritis</u> is used to denote inflammation associated with mucosal injury.
- Gastritis is mostly a histological term that needs biopsy to be confirmed.
- Epithelial cell damage and regeneration without associated inflammation is properly referred to as "gastropathy"
- Gastropathy may be referred without histological evidence and just according to gross appearance in endoscopy or radiology

### **Pathophysiology**

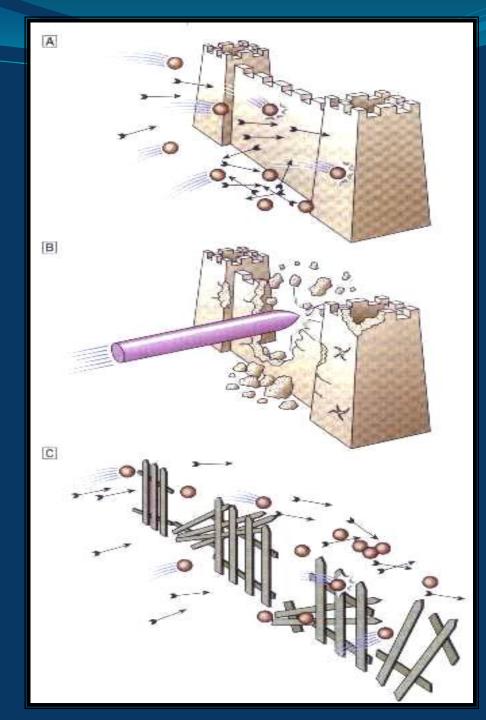


Imbalance of: Aggressive factors: And Defensive factors:

### Etiology of Gastritis

### A) Normal

- B) Increased Attack \*HCI
- \*Pepsin.
- \*NSAIDs.
- C) Weak defense \*Helicobacter pylori. \*Stress.
- \* drugs.
- \* smoking.



# Gastritis

# Acute

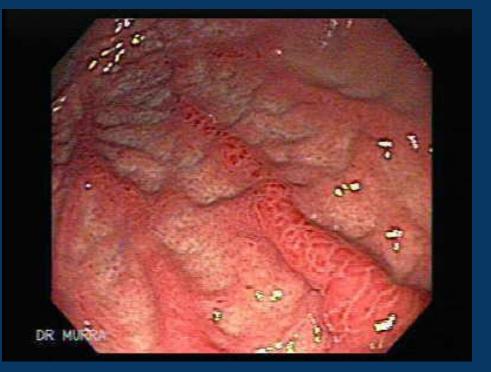
Chronic

### **Acute gastritis:**

### Refers to short term inflammation and neutrophilic infiltrate.

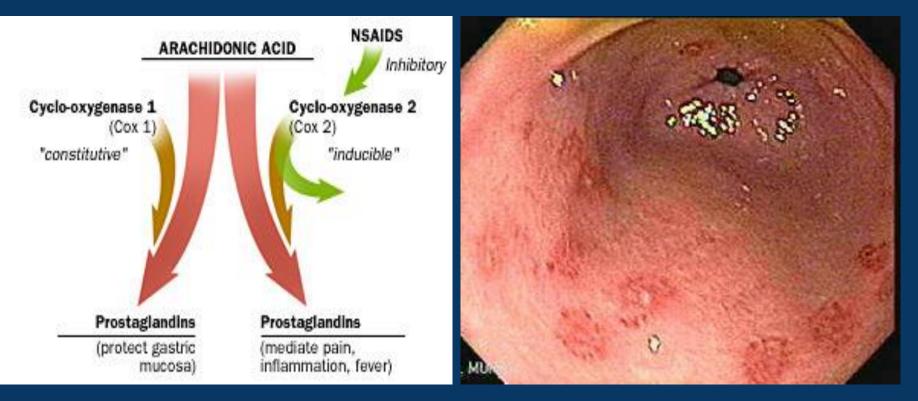


Chronic gastritis: referring to long standing form and mononuclear cell infiltrate (lymphocyte and macrophages)



### Etiology: Frequently associated with each others:

## NSAIDS Aspirin



## Heavy smoking

### Mechanisms

- Stimulate gastric acid secretion.
- Stimulate bile salt reflux.
- Causes alteration in mucosal blood flow.
- Decrease mucus secretion.
- Reduces prostaglandin synthesis.
  - Decrease pancreatic bicarbonate secretion.



Systemic infection and seriously ill patients.
Severe stress e.g. trauma, burns Multiple injured patient.
Surgery.

Ischemia.

> Unrecognized until bleeding started.
 > Difficult to Rx.
 > Better to prevent?



**Excessive alcohol consumption.** 

Often, idiopathic

### **Stages of Acute Gastritis**

# Acute superficial gastritis.

An acute mucosal inflammation of superficial gastric mucosa that is usually transient.

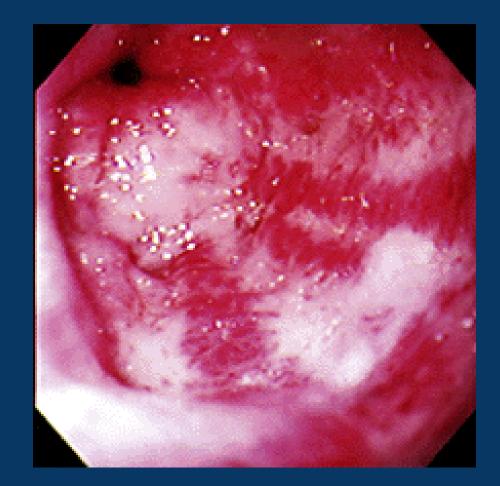


Acute erosive gastritis Destruction of multiple small zones of superficial mucosa.

There may be hemorrhage or sloughing



Acute Gastric Ulceration Destruction of full thickness of mucosa It is an important cause of severe GI bleeding.



### **Acute Gastritis**

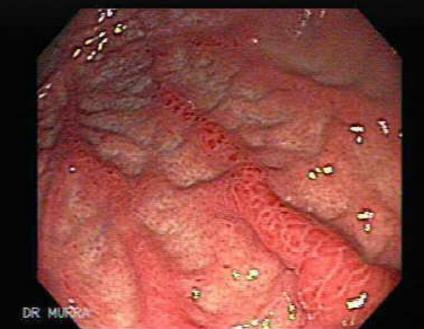
#### **Clinical Features**

>broad range of symptoms and signs that depend on the severity of the condition.

- >Asymptomatic.
- >Epigastric pain.
- Nausea & vomiting.
- >Hemorrhage, massive hematemesis, Melena.
- > Or fatal blood loss.

### **1- Type A Gastritis:**

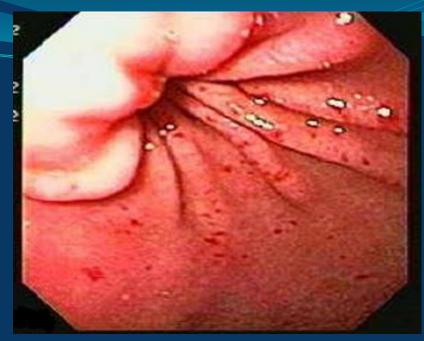
- Autoimmune antibodies against parietal cells.
- No HCI.... Achlorhydria
- No IF..... Pernicious anemia B12 malabsorptin.
- Hypergastrinemia...
- Microadenoma ECL cell.
- Premalignant.

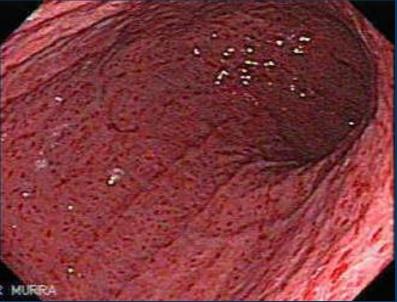




### **2- Type B Gastritis:**

- H. pylori associated.
- Mostly affect antrum.
- patients prone to peptic ulcer.
- •Those with pangastritis prone to cancer.
- Pangastritis.. Metaplasia dysplasia...CA.





### **3- Reflux Gastritis:**

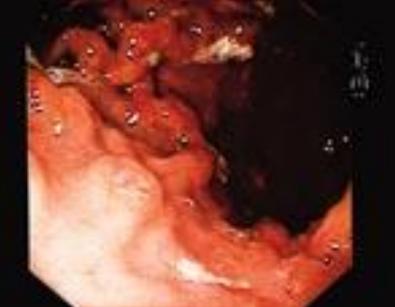
- Caused by enterogastric reflux.
- After destructive gastric surgery.
- After cholecystectomy.
- Occasionally no surgery.
- > Rx.
- Bile chelating agents.
- prokinatic agents, domperidone
- Surgery: severe non responsive patients.



**4- Lymphocytic gastritis** 

- Rare.
- •T cell infiltration.
- Probably H pylori infection.





### **Other Gastritis**

- Eosinophilic gastritis: allergic basis . Treated by steroid, cromoglycate.
- Granulomatous Gastritis: in Crohn's and Tuberculosis.
- AIDS Gastritis: Cryptosporidium.
- Phlegmonous Gastritis: bacterial

### **Clinical Features of chronic gasrtitis:**

Usually only a few symptoms:

- > Nausea.
- > Vomiting.
- > Upper abdominal discomfort.

### Hypertrophic gastritis

### > What is hypertrophic gastritis??????

