

endoscopic indication:

- ① Bleeding
 - ② wt. loss (non intentional)
 - ③ dysphagia, odynophagia
 - ④ anemia.
 - ⑤ history of cancer.
 - ⑥ elderly > 60 year.
 - ⑦ No Response to dyspepsia treatment.
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H. pylori diagnosis:

- ① oral urease test (urea breath test).
- ② Blood test
- ③ stool antigen test
- ④ Biopsy

Upper GI Bleeding :-

→ presentation :

- fresh blood
- hematochezia. → massive
- melena.
- coffee ground vomiting.

→ causes :

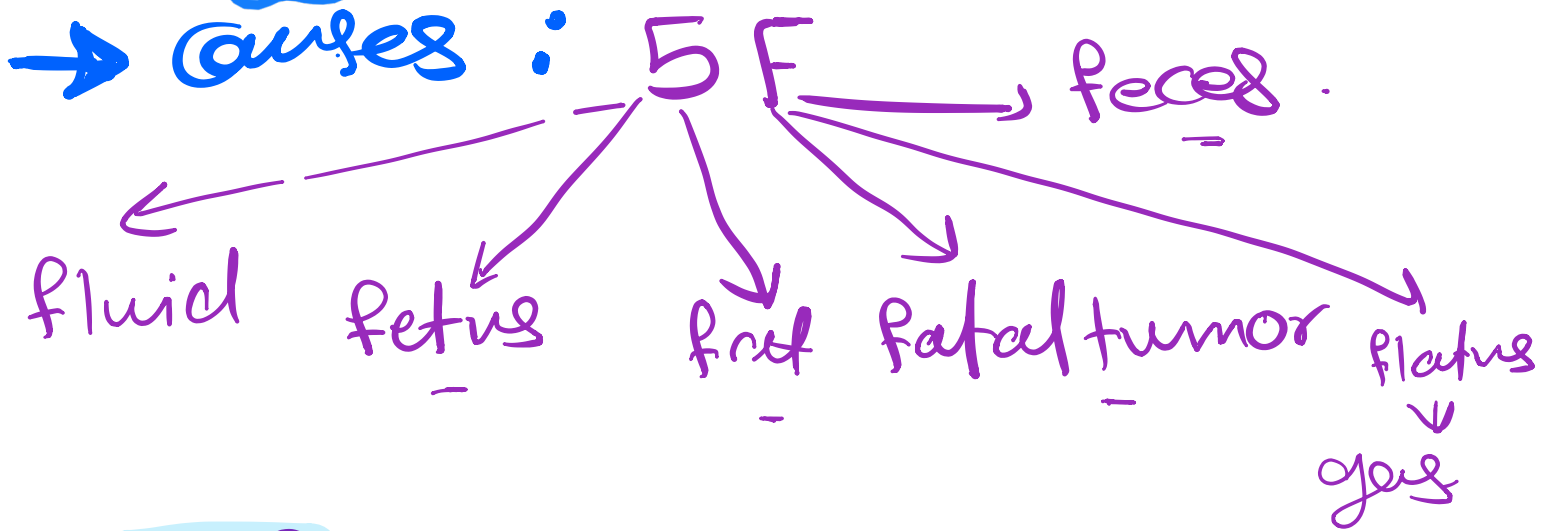
variceal

- esophageal varices
- gastroesophageal varices
- portal hypertension gastro patly.
- GAV (gastric Antral vascular ectasia).

non variceal

- PUD
- hereditary telangiectasia.
- hemobilia
- Mallory weiss
- hemosuccus pancreaticus
- esophageal cancer
- Zollinger-ellison syndrome.

Distention



* gases

- dyspepsia, IBS, more acute obstruction.

* feces.

- constipation, stool impaction.
- change in Bowel habit.

* tumor

bleeding on rectum, wt loss
anemia

↳ Fatigue, headache, dizziness.

constitutional symptom

Family history.

← **fetus** خضول نعل pregnancy test ^{women} ^{نساء}
على ما الآخر differential diagnosis وبألفا
عن صوعر الوردة الأخيرة.

* **fluid**.

وبه يتجمع دغاً في fluid (gravity)
عن لوكله قاعه أو ناع أو واقف.

ببه التجميع فن ← غبال عن
lower limb edema

نح انتفاخ برجليك أو لا

← "ملا بجليك انتفاخ باليد" وانتفاخ باليد
فكر انو هيا fluid

fluid يتجمع في chest, back
lower limb و بطن بنصف الجسم
أو بعضه، أو في حنون و خارجها
تنام على ظهري و تنفخ بطني

تفكر أنو المريف هذا عند
Accumulation
of fluid

- ascitis • pleural effusion
- pulmonary edema • liver disease
- heart failure • lung disease

نوع hypalbuminemia عند
heart failure هذا

differential diagnosis of ascitis:
portal SAAAG بنفوار
non portal و
وکنف افیر حلاً بیه کن سب

• effusion = pleural fluid ÷ serum fluid.

SAAAG $\begin{cases} > 1.1 \text{ g/dL} & \text{portal hyper} \\ < 1.1 \text{ g/dL} & \text{nonportal.} \end{cases}$
↳ Albumin serum - Albumin ascitis.

portal hypertension causes of ascitis:

- ① cirrhosis
- ② R-side heart failure.
- ③ liver failure
- ④ Budd-chiari syndrome
- ⑤ myxedema

الفرق بين الـ R-side cardiac و
بطاني ان حباب الكلى

الأنواع
cardiac و protein
تكون اقل من ايبا
2.5 g/dL.

generalised edema الغرق
anasarca ؟

⊆ Anasarca اناساركا
Generalized edema + one of
the 3rd space accumulation:

- ① ascitis
- ② pericardial
- ③ pleural effusion.

non portal hypertension

causes of ascitis:

(SAAG < 1.1 g/dL, protein > 2.5 .)

- ① Tuberculous peritonitis.
- ② fungal & bacterial peritonitis
- ③ nephrotic syndrome.
- ④ pancreatitis
- ⑤ peritoneal carcinomas.

• parotid swelling
• xanthelasma.
• pigmentation

} hepatitis C

Pre hepatic causes of portal

hypertension:

- splenic
- portal vein thrombosis

AST > ALT:

- ① wilson disease
- ② alcoholic
- ③ cirrhosis.

- normal AST $\Rightarrow$ 0 - 40
ALT $\Rightarrow$ 0 - 42

• $\text{ALT} > \text{AST}$

grade of edema :-

Grade + → mild : Both feet / ankle.

Grade ++ → Moderate : Both feet + lower legs, hand or lower arm

Grade +++ → Severe : Generalized Bilateral pitting edema, including Both feet, leg, arm, face.

* Diarrhea :

- Acute $\rightarrow$ < 2 week.
 - intermittent $\rightarrow$ 2-4 week
 - chronic $\rightarrow$ > 4 week
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