

Case 3; 2013

Student's Case

Curriculum Development Unit

Year Two, GASTROINTESTINAL & HAEMATOLOGY Block

Tutorial One

**“... as dark as
coffee ground”**

King Saud University
College of Medicine
Department of Medical Education



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Trigger (60 Minutes)

Saif Abdullah, a 58-year-old business man from Dammam is on a business trip for about a week in Riyadh. He is staying with his business assistant in a hotel in Riyadh. On the third day of his stay, he is found by the hotel housekeeper on the floor of his room in a pool of blood. The hotel manager calls an ambulance immediately. Saif is able to talk to the ambulance officers. He has vomited large amount of dark blood as he was preparing to go for breakfast. He has no injuries. One of the ambulance officer noticed that the sclerae of Saif's eyes are yellow and he has increased abdominal girth.

Discussion Questions:

- Are there any difficult words you do not understand?
- List the key information about Saif.
- Identify Saif's presenting problems.
- For each problem, generate a list of possible causes (hypotheses).
- What further information would you like to know from history to refine your hypotheses?

On the way to the Hospital, the assistant of Mr. Saif says the ambulance officer, "Mr. Saif has been unwell for the last few weeks. Two colleagues at work noticed that his eyes are yellow. He always feels tired and not fit as he used to be". He has always been fit and he used to be a swimming champion for several years."

On further questioning, Saif responds to the ambulance officer's questions and mentions that he has noticed a progressive increase in his abdomen and he has to buy new trousers in a bigger size to fit him. Because he is always busy and travels a lot, he has no time to see his general practitioner and has not seen him for about two years.

He has no history of hyperacidity or heartburn. He has no symptoms suggestive of peptic ulcer. No changes in the colour of his urine.

Past history:

Saif has a major road traffic accident about 30 years ago and fractured both of his femurs and needed blood transfusion. Apart from this accident, there is no history of hospital admission or investigations.

Medications and allergy:

Nil

Alcohol and Smoking:

He smokes 20 cigarettes per day for over 30 years. He drinks alcohol while he is on a business trip abroad but he is not a heavy drinker.

Family history

No family history of blood diseases or blood disorders.

Social history

He is married and has three grown up children- 20, 22, and 25 years old. He has no financial problems. He always travels abroad and spends less time with his family.

Discussion Questions:

- Are there words that you do not understand?
- Summarize key information that you have obtained from this progress.
- Identify Saif's new problems. Provide hypotheses for each problem.
- Use the new information obtained to refine your hypothesis.
- What should the doctor do at this stage?

Clinical Examination

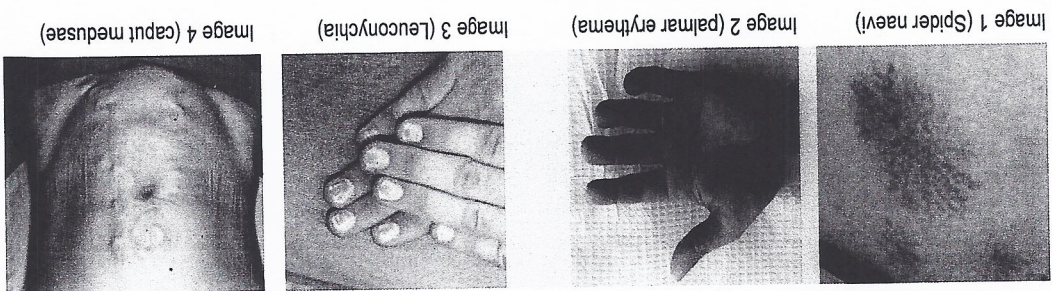
(30 Minutes)

He looks pale and the sclerae of his eyes are yellow in colour. There are no palpable lymph nodes. His vital signs are summarized in the table below:

Vital Signs	Saif's results	Normal range
Temperature	36.8 °C	36.6-37.2 °C
Pulse rate	120/min, regular	70-100/min
Respiratory rate	22/min	12-16/min
Blood pressure	110/69 mmHg (lying) 80/55 mmHg (sitting)	100/65 - 135/80 mmHg

Gastrointestinal System Examination

- Spider naevi are found on his face, neck and both shoulders (see images 1).
- His hands shows palmar erythema (see image 2) and his nails show leuconychia (see image 3).
- He has gynaecomastia on both sides and his testicles are atrophied.
- His abdominal girth is increased and there are dilated veins and the umbilicus (caput medusae, see image 4). No umbilical or inguinal hernia.
- Abdominal palpation: The liver span is 8 cm (shrunk); normal 12-14 cm). The spleen is 3 cm below the left costal margin.
- Percussion of his abdomen: There is positive shifting dullness (indicating the presence of free fluid in the peritoneal cavity).
- A pitting oedema is noticed on his lower limbs up to 5 cm below his knees.



Source: C:\Documents and Settings\Prof.Samy\Desktop\caput.htm

Respiratory and Cardiovascular Examination

Apart from his haemodynamic changes as per blood pressure readings, nothing significant is found.

Nervous System Examination

Normal.

Discussion Questions:

- Are there any terms that you do not understand?
- Summarize the key information that you have obtained from this progress.
- Refine your hypotheses and identify your most likely hypothesis.
- Work out with your group your "learning issues"?

Resources

A note to students: You are not required to read all these textbooks and resources to prepare for your learning issues. You could use one textbook or one resource for each discipline. For example, for this case you will need to use a resource covering issues related to the case from four disciplines: Physiology, Anatomy, Histology, and Medicine. Once you have identified your learning resources, research them for your learning issues and the questions raised in the group discussion. You might choose to use alternative resources other than those listed below.

Textbooks:

- Moore KL, Dalley AF. *Clinically Oriented Anatomy*. 4th ed. Philadelphia: Lippincott, Williams & Wilkins; 1999.
- Rhoades R, and Pflanzer R. *Human Physiology*, 4th ed. London: Brooks/Cole; 2003.
- Drake RL, Vogl W, Mitchell AWM. *Gray's anatomy for students*. Philadelphia: Elsevier Churchill Livingstone; 2005.
- Guyton AC and Hall JE. *Textbook of Medical Physiology*. 10th ed. Philadelphia: WB Saunders & Co; 2000.
- Gartner LP and Hiatt JL. *Color Textbook of Histology*. 2nd ed. Philadelphia: WB Saunders & Co; 2001.
- Kumar P and Clark M. *Clinical Medicine*. 7th ed. Edinburgh: WB Saunders; 2009.
- Fox SI. *Human Physiology*, 9th Ed. McGraw Hill, 2005

Educational websites:

1. <http://medicine.medscape.com/article/175248-overview>. This chapter is from eMedicine and provides you with an overview on portal hypertension, and esophageal varices. Be selective on what you want to learn. Areas such as clinical picture, pathophysiology, and basic investigations might be suitable for your learning at this stage for this case.
2. <http://www.meddean.luc.edu/lumen/meded/orfpath/pathtill.htm>. This website from the Loyola University of Chicago, Stritch School of Medicine, Department of Pathology, provides an atlas for the pathology of the liver. This resource might be also useful for you in years 3, 4 and 5. Be selective of what you want to learn in relation to this case.