



## GI bleeding

Color index :

**Important**

Further explanation

[Editing link](#)

## GI bleeding

Is loss of blood through Gastrointestinal tract may be through the oral cavity or anal mostly present from both

### Manifestation :

- 1- Hematemesis : Passage of blood from oral cavity (emesis)
- 2- Hematochezia : Passage of maroon or bright red blood or blood clots per rectum
- 3- Melena Black/tarry liquid, foul-smelling stool
- 4-Bloody diarrhea

**Note this case in an ER case** if your 1st to approach patient you must manage 1st

- ABC: airway , breathing , circulation
- Vitals: pulse , blood pressure , respiratory voice, temperature

GI bleeding specific :(depending on the case)

- Resuscitation (iv fluids - oxygen - blood transfusion)
- Blood test (Hemoglobin , hematocrit, HPT ,PTT ,platelet count)
- Fluids (2 Boluses )or fresh frozen plasma or blood if needed depending on symptoms and test results

### HISTORY

- **Chief complain:** In patient own words bleeding itself might not be the chief complaint
- **HPI**
  - If pain describe SOCRATES

Manifestations asking :

Manifestation	Questions
Hematemesis (sign for upper and lower GI bleed)	Is the bleeding with cough or is it foamy and bright red (to rule out confusion with hemoptysis) Is your vomit black or red ? How many times have vomited ? Can you tell the volume of blood (approximate)? Did the bleeding come after multiple vomiting ? Do you have nosebleed (to rule out confusion with epistaxis) Before you seen blood in vomitus have experienced interince retching vomiting Did you experience this before? Do feel lightheadedness?
Hematochezia (Usually lower GI bleeding)	Is it with stool or you see it in toilet paper or even cloths Is your stool black or red Can you tell the amount Is it with each time you pass stool Do you feel difficulty in passing stool Do you feel any pain ? describe !! Did you notice any change in your bowel habits ? when? for how long Do you feel any lightheadedness ?
Melena upper GI	What is the color of stool red or dark? Did you notice any change in the smell of your stool ? (bad) Did you find any blood on your cloths or paper toilet? Do feel lightheadedness?
Bloody diarrhea lower gi	When did start ? Do you have any abdominal pain ? Do have any pain in passing stool? How frequently do pass stool Can you tell the volume of blood you passed ? Do you have any fever ?

If you have diagnosis in mind ask about (risk factors , symptoms , complications)



- Upper GI :  
Esophagus ,Stomach , Duodenum end at duodeno-jejunal flexure
- lower GI :  
Jejunum , Ileum , all large intestine (colon) end at anus

### Upper GI bleeding

- Refers to a source of bleeding above the ligament of Treitz in the duodenum. Bleeding from mouth

DDx	risk factors	Symptoms and signs	Complications
Peptic Ulcer	<ul style="list-style-type: none"> <li>• <i>H pylori</i> infection</li> <li>• Drugs (NSAIDS, oral steroids)</li> <li>• Tobacco</li> <li>• Stress</li> <li>• Eating habits</li> </ul>	<ul style="list-style-type: none"> <li>• Epigastric pain after food</li> <li>• Hematemesis</li> </ul>	<ul style="list-style-type: none"> <li>• Barrett esophagus</li> <li>• Esophageal stricture</li> </ul>
Esophageal varices	<ul style="list-style-type: none"> <li>• Chronic liver diseases</li> <li>• Portal HTN</li> <li>• Alcoholism</li> <li>• Schistosomiasis</li> <li>• Hepatitis C</li> <li>• Thrombosis Hx</li> </ul>	<ul style="list-style-type: none"> <li>• Dark hematemesis</li> <li>• Jaundice</li> <li>• Ascites</li> <li>• Dark urine</li> <li>• Edema</li> <li>• Malaise</li> <li>• Weight loss</li> </ul>	<ul style="list-style-type: none"> <li>• Liver failure</li> <li>• Death due to bleeding</li> <li>• Hepatic encephalopathy</li> <li>• Hepatorenal syndrome</li> <li>• Cardiomyopathy</li> </ul>
Mallory-Weiss tear	<ul style="list-style-type: none"> <li>• Repeated vomiting</li> <li>• Hiatal hernia</li> <li>• Mucosal abnormality</li> <li>• Repeated hiccups</li> </ul>	<ul style="list-style-type: none"> <li>• Red hematemesis</li> <li>• epigastric pain</li> </ul>	<ul style="list-style-type: none"> <li>• Nothing</li> <li>• repeated episodes is very uncommon</li> </ul>
acute gastritis	<ul style="list-style-type: none"> <li>• NSAIDs</li> <li>• alcohol</li> <li>• Hpylori</li> <li>• CMV</li> <li>• Acute stress</li> <li>• trauma</li> </ul>	<ul style="list-style-type: none"> <li>• Hematemesis</li> <li>• Abdominal pain</li> <li>• Vomiting</li> <li>• Nausea</li> </ul>	<ul style="list-style-type: none"> <li>• Hematemesis</li> <li>• Renal insufficiency due to Dehydration</li> </ul>

## Lower GI bleeding

- Defined as bleeding below the ligament of Treitz bleeding from rectum

DDx	Risk factors	Symptoms and signs	Complications
<b>Diverticulosis</b>	<ul style="list-style-type: none"> <li>- Elderly &gt;60</li> <li>- Low-fiber diet</li> <li>- Constipation</li> <li>- Obesity.</li> </ul>	<ul style="list-style-type: none"> <li>- Left lower quadrant pain (70% of patients)</li> <li>- Change in bowel habits</li> <li>- Nausea and vomiting</li> <li>- Constipation</li> <li>- Diarrhea</li> <li>- Flatulence</li> <li>- Bloating</li> <li>- Generalized tenderness with rebound and guarding</li> <li>- Distended abdomen</li> <li>- Absent bowel sounds</li> <li>- Abdomen tympanic to percussion</li> </ul>	<ul style="list-style-type: none"> <li>- Abscess</li> <li>- Intestinal fistula</li> <li>- Intestinal perforation</li> <li>- Intestinal obstruction</li> <li>- Peritonitis</li> <li>- Sepsis and septic shock</li> <li>- Diverticular bleeding</li> </ul>
<b>Angiodysplasia</b>	<ul style="list-style-type: none"> <li>- Elderly &gt;60</li> <li>- Hypoperfusion (cardiac or pulmonary)</li> <li>- Hx of ESRD</li> <li>- Hx of von Willebrand's disease</li> <li>- Hx of Aortic stenosis</li> <li>- Anticoagulant therapy</li> </ul>	<ul style="list-style-type: none"> <li>- Usually asymptomatic</li> <li>- Usually low grade maroon-colored stool, melena Or Hematochezia</li> </ul>	<ul style="list-style-type: none"> <li>- Anemia due to chronic bleeding</li> <li>- Hemodynamic instability may led to massive bleeding</li> </ul>
<b>Carcinoma</b>	<ul style="list-style-type: none"> <li>- Smoking</li> <li>- Obesity</li> <li>- Low fiber diet</li> <li>- Family history</li> <li>- Genetic</li> </ul>	<ul style="list-style-type: none"> <li>- Fatigue</li> <li>- Weight loss</li> <li>- Iron-deficiency anemia</li> <li>- Rectal bleeding</li> <li>- Abdominal pain</li> <li>- Change in bowel habits</li> <li>- Intestinal obstruction or perforation</li> </ul>	<ul style="list-style-type: none"> <li>- Obstruction</li> <li>- Metastasis</li> <li>- Bleeding related mortality</li> </ul>
<b>Hemorrhoids</b>	<ul style="list-style-type: none"> <li>- Straining and constipation</li> <li>- Pregnancy</li> <li>- Prolonged sitting</li> <li>- Portal hypertension</li> <li>- Abnormality in anal sphincter</li> </ul>	<ul style="list-style-type: none"> <li>- Rectal pain</li> <li>- Bleeding maybe with stool or found on toilet paper or even cloths</li> </ul>	<p><b>Rare</b></p> <ul style="list-style-type: none"> <li>- Thrombosis,</li> <li>- secondary infection</li> <li>- Ulceration</li> <li>- Abscess, incontinence</li> </ul>
<b>Anal fissures</b>	<ul style="list-style-type: none"> <li>- Abnormality in anal sphincter</li> <li>- lower fiber intake</li> </ul>	<ul style="list-style-type: none"> <li>- Bleeding maybe with stool or found on toilet paper or even cloths</li> <li>- Itching</li> <li>- Malodorous discharge</li> </ul>	<ul style="list-style-type: none"> <li>- Non</li> </ul>

- **Past Medical History :**
  - Hx of Abdominal aortic aneurysm or Aortic graft :To roll out aortoenteric fistula , abdominal Aortic Aneurysm
  - Hx of Renal disease :Due to uremia causing platelet dysfunction
  - Hx of liver disease : portal hypertension
  - Hx of bleeding disorders
- **Past Surgical History :**
  - Ask especially about cardiac disease
  - Blood transfusion : when and where risk of hepatitis C
- **Medication**
  - Aspirin and other NSAIDs/pain analgesics: Cause peptic ulcer
  - Antiplatelet agents (e.g., clopidogrel) , heparin & warfarin : Promotes bleeding
  - Bismuth and iron : Turns the stool black
  - Immunosuppressants (chemotherapy, prednisone, anti rejection drugs) : Opportunistic infections (CMV, herpes simplex virus, Candida)
  - Alendronate, potassium, quinidine, iron, antibiotics : Pill-induced esophageal ulcer
  - Oral contraceptive pills If female
  - Herbal medications
  - Allergy to medication
- **Family History**
  - Similar symptoms ?
  - Ask about family Hx of colon cancer ?
  - Ask about family Hx of IBD?
  - Hx of Malignancies?
  - Hx of Bleeding disorders
  - Any chronic diseases ( DM, htn , hyperlipidemia..)
  - Are the parents alive? If they are dead then ask at age they died and what was the cause of their death?

- **Social**
  - Habits ( unprotected sexual , illegal drugs iv , alcohol abuse,)
  - Alcohol ( should be in HPI if related to diagnosis e.g liver cirrhosis)
  - Smoking ( should be in HPI if you think it's related)
  - Traveling
  - Activity
  - Job ( stress)

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