

Gastroenterology Summary

The role of the GP in gastrointestinal health

As a GP, your role is to:

- Diagnose, investigate and manage digestive symptoms using history, examination, monitoring and referral where appropriate. Take into account how digestive symptoms can often be multiple and imprecise
- Communicate effectively and consider the social and psychological impact of digestive problems including the potential difficulties for some patients to discuss digestive symptoms due to embarrassment and / or social stigma
- Intervene urgently when patients present with emergencies related to digestive health
- Coordinate care with other organisations and professionals (including community nurses, pharmacists, drug and alcohol centres, secondary care and voluntary services) leading to effective and appropriate acute and chronic digestive disease management
- Offer advice and support to patients, relatives and carers regarding prevention, prescribing, monitoring and self-management (e.g. lifestyle interventions including diet, weight loss, alcohol and drugs, stress reduction and primary cancer and liver disease prevention).

Key Areas for Exam preparation

Common and important conditions

- Dyspepsia, gastro-oesophageal reflux disease (GORD), and Irritable Bowel disease (IBS) are common conditions, affecting a significant proportion of the population
- Chronic abdominal conditions: inflammatory bowel disease, diverticular disease, coeliac disease and irritable bowel syndrome
- Acute abdominal conditions: appendicitis, acute obstruction and perforation, diverticulitis, Meckel's diverticulum, ischaemia, volvulus, intussusception, gastric and duodenal ulcer, pancreatitis, cholecystitis, biliary colic, empyema and renal colic
- Medication effects: analgesics (codeine, NSAIDs, paracetamol), antibiotics (nausea, risk of *c. difficile*), proton pump inhibitors (potential masking of symptoms)
- Post-operative complications
- Hernias: inguinal, femoral, diaphragmatic, hiatus, incisional
- Functional disorders: non-ulcer dyspepsia, irritable bowel syndrome, abdominal pain in children.

Upper GI conditions

- Gastrointestinal haemorrhage including oesophageal varices, Mallory-Weiss syndrome, telangiectasia, angiodysplasia, Peutz-Jeghers syndrome
- Gastro-oesophageal reflux disease, non-ulcer dyspepsia, peptic ulcer disease, *H. pylori*, hiatus hernia
- Oesophageal conditions including achalasia, malignancy, benign stricture, Barrett's oesophagus, globus.

Lower GI conditions

- Constipation: primary and secondary to other systemic diseases such as hypothyroidism, drug-induced, hypercalcaemia
- Diarrhoea
- Gastrointestinal infection including:
 - toxins such as *C. difficile* and *E coli*;
 - bacterial causes such as salmonella, campylobacter, amoebic dysentery;
 - viral causes such as rotavirus, norovirus; and
 - parasitic causes such as *Giardia lamblia*
- Gastrointestinal malignancies including oesophageal, gastric, pancreatic, colorectal, carcinoid, lymphoma
- Inflammatory bowel disease such as Crohn's disease, ulcerative colitis
- Malabsorption including coeliac disease, lactose intolerance, secondary to pancreatic insufficiency such as chronic pancreatitis, cystic fibrosis, bacterial overgrowth
- Rectal problems including anal fissure, haemorrhoids, perianal haematoma, ischio-rectal abscesses, fistulae, prolapse, polyps, malignancy.

Liver, gallbladder and pancreatic disease

- Abnormal liver function tests: assessment, investigation and consideration of underlying reasons such as:
 - drug-induced: alcohol, medications (paracetamol, antibiotics), chemicals;
 - infection: viral hepatitis, leptospirosis, hydatid disease;
 - malignancy: primary and metastatic;
 - cirrhosis (e.g. from alcohol, fatty liver/ non-alcoholic fatty liver disease); and
 - autoimmune disease: primary biliary cirrhosis, chronic active hepatitis, α -1 antitrypsin deficiency, Wilson's disease, haemolysis
- Secondary effects of liver diseases such as ascites, portal hypertension, hepatic failure
- Gallbladder disease: gallstones, cholecystitis, cholangitis, biliary colic, empyema, malignancy

- Pancreatic disease: acute pancreatitis, chronic pancreatitis, malabsorption, malignancy including islet cell tumours.

Nutrition

- Dietary management of disease, inadequate or excessive intake
- Impact of diet on health (e.g. risk of cancer from high red meat intake) and dietary approaches to healthy living and prevention of disease
- Disorders of weight: obesity and weight loss including non-nutritional causes such as cancer, thyroid disease and other endocrine conditions
- Nutritional problems: vitamin and mineral deficiencies or excess, supplementary nutrition such as dietary, PEG and parenteral feeding
- Complications and management of stomas.

Suggested Resources

General Information

- <https://journals.sagepub.com/toc/inoa/12/9>
- <https://elearning.rcgp.org.uk/mod/page/view.php?id=3927>
- <https://www.rcemlearning.co.uk/reference/abdominal-pain-without-shock/>
- <https://www.bsg.org.uk> › asset

Dyspepsia, gastro-oesophageal reflux disease (GORD), and Irritable Bowel disease (IBS)

- <https://www.evidence.nhs.uk/search?q=management+GORD>
- <https://www.evidence.nhs.uk/search?q=ibs+guideline>
- <https://www.nice.org.uk/guidance/cg61/evidence>
- https://www.bda.uk.com/publications/professional/ibs_guideline_exec
- IBS - <https://journals.sagepub.com/doi/10.1177/1755738019855099> Low-FODMAP diets:
Irritable bowel syndrome <https://journals.sagepub.com/doi/full/10.1177/1755738019846165>

Chronic abdominal conditions: inflammatory bowel disease, diverticular disease, coeliac disease and irritable bowel syndrome

- <https://www.rcgp.org.uk/clinical-and-research/resources/toolkits/inflammatory-bowel-disease-toolkit.aspx>
- <https://cks.nice.org.uk/crohns-disease>
- <https://cks.nice.org.uk/ulcerative-colitis>
- <https://cks.nice.org.uk/diverticular-disease>; <https://patient.info/doctor/diverticular-disease>
- <https://cks.nice.org.uk/coeliac-disease>
- <https://journals.sagepub.com/doi/full/10.1177/1755738015615378>

Acute abdominal conditions: appendicitis, acute obstruction and perforation, diverticulitis, Meckel's diverticulum, ischaemia, volvulus, intussusception, gastric and duodenal ulcer, pancreatitis, cholecystitis, biliary colic, empyema and renal colic

- <https://www.rcemlearning.co.uk/foamed/induction-book-2-abdominal-pain/>
- <https://www.evidence.nhs.uk/search?q=appendicitis>
- <https://bestpractice.bmj.com/topics/en-gb/290>
- <https://www.rcemlearning.co.uk/reference/appendicitis/#1568115322767-035e6999-d527>
- <https://patient.info/doctor/intestinal-obstruction-and-ileus>
- <https://patient.info/doctor/volvulus-and-midgut-malrotations>
- <https://patient.info/doctor/meckels-diverticulum>
- <https://www.evidence.nhs.uk/search?q=Intestinal+volvulus>
- <https://www.evidence.nhs.uk/search?q=Intussusception>
- <https://www.evidence.nhs.uk/search?q=peptic-ulcer>
- <https://www.evidence.nhs.uk/search?ps=40&q=stomach+ulcer>
- <https://www.evidence.nhs.uk/search?q=pancreatitis+acute>
- <https://www.nice.org.uk/guidance/ng104>
- <https://www.evidence.nhs.uk/search?q=gallstones>
- <https://www.evidence.nhs.uk/search?q=Acute+cholecystitis>
- <https://www.evidence.nhs.uk/search?ps=40&q=Renal+colic+acute>
- <https://journals.sagepub.com/doi/full/10.1177/1755738017703412>

Medication effects: analgesics (codeine, NSAIDs, paracetamol), antibiotics (nausea, risk of c. difficile), proton pump inhibitors (potential masking of symptoms)

- <https://bnf.nice.org.uk/drug/codeine-phosphate.html#sideEffects>
- <https://bnf.nice.org.uk/treatment-summary/non-steroidal-anti-inflammatory-drugs.html>
- <https://www.nhs.uk/conditions/antibiotics/side-effects/>
- <https://cks.nice.org.uk/diarrhoea-antibiotic-associated>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1114430/>
- proton pump inhibitors and upper gastrointestinal cancers: The myths and truths explained
<https://journals.sagepub.com/doi/full/10.1177/1755738019856636>

Post-operative complications

- <https://www.evidence.nhs.uk/search?q=post%20operative%20complications>
- <http://www.iosrjournals.org/iosr-jdms/papers/Vol16-issue12/Version-14/F1612143641.pdf>

Hernias: inguinal, femoral, diaphragmatic, hiatus, incisional

- <https://www.evidence.nhs.uk/search?q=guidelines+hernia>
- <https://www.evidence.nhs.uk/search?q=femoral+hernia>
- <https://geekymedics.com/hernias-explained/>

Functional disorders: non-ulcer dyspepsia, irritable bowel syndrome, abdominal pain in children.

- <https://cks.nice.org.uk/dyspepsia-proven-functional>
- Management of Recurrent Abdominal Pain in Childhood
<https://doi.org/10.1093/innovait/inq150>
- <https://bestpractice.bmj.com/topics/en-gb/787/diagnosis-approach>
- <http://www.boltonft.nhs.uk/wp-content/uploads/2017/06/1831-Abdominal-pain-in-Children.pdf>
- https://podcast.app/abdominal-pain-in-children-e957149/?utm_source=and&utm_medium=share

Upper GI conditions

Gastrointestinal haemorrhage including oesophageal varices, Mallory-Weiss syndrome, telangiectasia, angiodysplasia, Peutz-Jeghers syndrome

- <https://www.evidence.nhs.uk/search?q=upper+gi+bleed+guidelines>
- <https://journals.sagepub.com/doi/full/10.1093/innovait/inp016>
- <https://pmj.bmj.com/content/78/915/4>
- <https://patient.info/doctor/oesophageal-varices>
- <https://patient.info/doctor/upper-gastrointestinal-bleeding-includes-rockall-score>
- <https://rarediseases.info.nih.gov/diseases/7378/peutz-jeghers-syndrome>
- <https://patient.info/doctor/mallory-weiss-syndrome-pro>
- <https://patient.info/doctor/rectal-bleeding-in-adults>

Gastro-oesophageal reflux disease, non-ulcer dyspepsia, peptic ulcer disease, H. pylori, hiatus hernia (see previous)

- <https://www.evidence.nhs.uk/search?q=guidance+dyspepsia>
- <https://www.evidence.nhs.uk/search?ps=40&q=h+pylori+treatment>
- <https://patient.info/doctor/dysphagia>
- <https://journals.sagepub.com/doi/full/10.1177/1755738015622654>

Oesophageal conditions including achalasia, malignancy, benign stricture, Barrett's oesophagus, globus.

- <https://www.evidence.nhs.uk/search?q=Oesophageal%20achalasia>
- <https://www.evidence.nhs.uk/search?q=GLOBUS+PHARYNGEUS>
- <https://www.evidence.nhs.uk/search?q=barrett-s-oesophagus>
- <https://patient.info/doctor/barretts-oesophagus-pro>
- <https://patient.info/doctor/achalasia-pro>
- <https://cks.nice.org.uk/gastrointestinal-tract-upper-cancers-recognition-and-referral>
- <https://www.evidence.nhs.uk/search?ps=50&q=oesophageal+strictures>

Lower GI conditions

Constipation: primary and secondary to other systemic diseases such as hypothyroidism drug-induced, hypercalcaemia

- <https://www.evidence.nhs.uk/search?q=nice+guidelines+and+constipation>
- <https://www.nice.org.uk/advice/kt1/chapter/Evidence-context>
- <https://www.guidelines.co.uk/paediatrics/nice-constipation-in-children-guideline/210505.article>
- <https://journals.sagepub.com/doi/abs/10.1093/innovait/inq026>

Diarrhoea

- <https://journals.sagepub.com/doi/abs/10.1177/1755738015592916?journalCode=inoa-children>
- <https://www.evidence.nhs.uk/search?q=diarrhoea+and+vomiting+in+adults>
- <https://www.evidence.nhs.uk/search?q=diarrhoea+treatment>

Gastrointestinal infection

- <https://www.evidence.nhs.uk/search?q=gastroenteritis>
- <https://cks.nice.org.uk/diarrhoea-prevention-and-advice-for-travellers>
- <https://patient.info/travel-and-vaccinations/travellers-diarrhoea-leaflet>
- <https://doi.org/10.1177/1755738017736077>

Gastrointestinal malignancies including oesophageal, gastric, pancreatic, colorectal, carcinoid, lymphoma

- <https://journals.sagepub.com/doi/full/10.1177/1755738019856634>
- <https://cks.nice.org.uk/gastrointestinal-tract-upper-cancers-recognition-and-referral>
- <https://doi.org/10.1177/1755738014550892> upper GI malignancy
- <https://www.evidence.nhs.uk/search?q=gi&ps=40&pa=4>
- <https://cks.nice.org.uk/gastrointestinal-tract-lower-cancers-recognition-and-referral>
- <https://cks.nice.org.uk/gastrointestinal-tract-upper-cancers-recognition-and-referral>
- <https://www.evidence.nhs.uk/search?q=Lymphoma+Guidelines>
- <https://rarediseases.org/rare-diseases/carcinoid-syndrome/>
- <https://www.evidence.nhs.uk/search?q=carcinoid+tumour>

Inflammatory bowel disease such as Crohn's disease, ulcerative colitis

- <https://www.evidence.nhs.uk/search?q=ibd%20dvt>
- <https://ibduk.org/ibd-standards/flare-management/flare-pathways>
- <https://www.crohnsandcolitis.org.uk/>
- <https://journals.sagepub.com/doi/10.1093/innovait/inn086>

Malabsorption including coeliac disease, lactose intolerance, secondary to pancreatic insufficiency such as chronic pancreatitis, cystic fibrosis, bacterial overgrowth

- <https://journals.sagepub.com/doi/full/10.1177/1755738015615378>
- <https://journals.sagepub.com/doi/full/10.1177/1755738015577803>
- <https://journals.sagepub.com/doi/abs/10.1093/innovait/inp174>
- <https://www.evidence.nhs.uk/search?q=Malabsorption+syndromes>
- <https://www.evidence.nhs.uk/search?q=cystic+fibrosis>
- <https://www.bsg.org.uk/education/web-education/difficult-clinical-scenarios/management-of-difficult-sibo.html>
- <https://www.evidence.nhs.uk/search?q=bacterial+overgrowth+treatment>
- <https://www.evidence.nhs.uk/search?q=small%20bowel%20bacterial%20overgrowth%20syndrome>

Rectal problems including anal fissure, haemorrhoids, perianal haematoma, ischio-rectal abscesses, fistulae, prolapse, polyps, malignancy.

- <https://www.evidence.nhs.uk/search?ps=30&q=Rectal+prolapse>
- <https://www.evidence.nhs.uk/search?q=Per+rectal+examination>
- <https://www.evidence.nhs.uk/search?ps=30&q=Anus+diseases>
- <https://www.evidence.nhs.uk/search?q=perianal+haematoma>
- <https://www.evidence.nhs.uk/search?q=Perianal+abscess>
- <https://patient.info/doctor/bowel-colonic-polyps-pro>
- <https://patient.info/doctor/colorectal-cancer>
- <https://journals.sagepub.com/doi/full/10.1177/1755738019856634>
- <https://www.evidence.nhs.uk/search?q=perianal+fistula>

Liver, gallbladder and pancreatic disease

- <https://www.evidence.nhs.uk/search?q=abnormal%20liver%20function%20test>
- <https://gut.bmj.com/content/67/1/6>
- <https://www.evidence.nhs.uk/search?q=NAFL+disease>
- <https://www.evidence.nhs.uk/search?q=autoimmune+liver+disease>
- <https://www.evidence.nhs.uk/search?q=+cirrhosis+liver+disease>
- <https://journals.sagepub.com/doi/full/10.1177/1755738019855092>
- <https://www.evidence.nhs.uk/search?q=+alpha+1+antitripin>
- <https://www.evidence.nhs.uk/search?q=wilsons+disease>
- <https://journals.sagepub.com/doi/abs/10.1093/innovait/inr182>
- <https://www.evidence.nhs.uk/search?q=haemolytic+anaemia>

Secondary effects of liver diseases such as ascites, portal hypertension, hepatic failure

- <https://www.evidence.nhs.uk/search?q=ascites>
- <https://www.evidence.nhs.uk/search?q=portal+hypertension>
- <https://www.evidence.nhs.uk/search?q=hepatic+failure>
- <https://www.bsg.org.uk> > asset

Gallbladder disease: gallstones, cholecystitis, cholangitis, biliary colic, empyema, malignancy

- <https://www.evidence.nhs.uk/search?q=gallbladder+disease>
- <https://www.evidence.nhs.uk/search?q=empyema>
- <https://www.evidence.nhs.uk/search?q=gallbladder+cancer>
- <https://www.evidence.nhs.uk/search?q=cholangitis>
- <https://www.evidence.nhs.uk/search?q=cholecystitis>
- <https://www.evidence.nhs.uk/search?q=gallstones>
- <https://www.rcemlearning.co.uk/reference/referencespancreatitis/>

Pancreatic disease: acute pancreatitis, chronic pancreatitis, malabsorption, malignancy including islet cell tumours.

- <https://www.evidence.nhs.uk/search?q=pancreatic+disease>
- <https://www.evidence.nhs.uk/search?q=pancreatic+cancer>
- <https://www.evidence.nhs.uk/search?q=chronic+pancreatitis>
- <https://www.evidence.nhs.uk/search?q=acute+pancreatitis>
- <https://www.evidence.nhs.uk/search?q=+malabsorption+pancreas>
- <https://www.evidence.nhs.uk/search?q=islet+cell+tumour>

Nutrition

Dietary management of disease, inadequate or excessive intake

- <https://www.evidence.nhs.uk/search?q=food+intake>
- <https://www.evidence.nhs.uk/search?q=inadequate+food+intake>
- <https://www.evidence.nhs.uk/search?q=excessive+food+intake>

Impact of diet on health (e.g. risk of cancer from high red meat intake) and dietary approaches to healthy living and prevention of disease

- <https://www.evidence.nhs.uk/search?q=diet+and+health>
- <https://www.bsg.org.uk> > asset
- <https://www.who.int/dietphysicalactivity/publications/trs916/summary/en/>
- <https://www.bowelcanceruk.org.uk/about-bowel-cancer/risk-factors/reducing-your-risk/diet/>
- <https://journals.sagepub.com/doi/full/10.1177/1755738019855412>

Disorders of weight: obesity and weight loss including non-nutritional causes such as cancer, thyroid disease and other endocrine conditions

- <https://www.evidence.nhs.uk/search?q=weight+problems>
- <https://www.evidence.nhs.uk/search?q=weight+and+thyroid>
- <https://cks.nice.org.uk/obesity>
- <https://journals.sagepub.com/doi/10.1093/innovait/inr152>
- <https://www.evidence.nhs.uk/search?q=obesity>

Nutritional problems: vitamin and mineral deficiencies or excess, supplementary nutrition such as dietary, PEG and parenteral feeding

- <https://www.evidence.nhs.uk/search?q=nutritional+>
- <https://www.evidence.nhs.uk/search?q=PEG>
- <https://www.evidence.nhs.uk/search?q=supplemental+feed>
- <https://cks.nice.org.uk/vitamin-d-deficiency-in-adults-treatment-and-prevention>
- <https://patient.info/search.asp?searchterm=vitamin%20b12%20deficiency>
- <https://patient.info/search.asp?searchterm=folate%20deficiency>
- <https://patient.info/search.asp?searchterm=vitamin%20b%20deficiency>
- <https://patient.info/doctor/vitamin-k-deficiency-bleeding>

Complications and management of stomas.

- <https://bnf.nice.org.uk/treatment-summary/stoma-care.html>
- <https://patient.info/doctor/stoma-care>
- <https://www.evidence.nhs.uk/search?q=stoma>