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Approach to the adult with dyspepsia

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- **Dyspepsia is a common symptom with an extensive differential diagnosis**
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Dyspepsia

- **postprandial fullness,**
- **early satiation**
- **epigastric pain**

ETIOLOGY

- **organic cause**
- **functional (idiopathic or nonulcer) dyspepsia with no underlying cause on diagnostic evaluation**

Dyspepsia secondary to organic disease

- **Peptic ulcer disease**
- **Gastroesophageal malignancy**
- **Biliary pain**
- **Drug-induced dyspepsia**
- **Other causes**

Other causes

- **Celiac disease**
- **chronic pancreatitis**
- **infiltrative diseases of the stomach (eg, eosinophilic gastroenteritis , Crohn disease, sarcoidosis , lymphoma, and amyloidosis), diabetic radiculopathy**
- **metabolic disturbances (eg, hypercalcemia, heavy metal toxicity)**
- **hepatoma, steatohepatitis, celiac artery compression syndrome, superior mesenteric artery syndrome, abdominal wall pain**
- **and intestinal angina**

Drug-induced dyspepsia

- NSAIDs and COX-2 selective inhibitors
- calcium channel blockers
- methylxanthines
- [alendronate](#), [orlistat](#), potassium supplements, [acarbose](#), dabigatran
- , iron, vitamin D, selective serotonin reuptake inhibitors,
- [sildenafil](#), sulfonylureas, and certain antibiotics, including [erythromycin](#)

Functional dyspepsia

- *Functional (idiopathic or nonulcer) dyspepsia requires exclusion of other organic causes of dyspepsia .*
- *It is defined by the presence of one or more of the following:*
- **postprandial fullness, early satiation, epigastric pain, or burning, and no evidence of structural disease to explain the symptoms**

INITIAL EVALUATION

- **History : RO:gastroesophageal reflux disease (GERD and IBS.**
- **The goal of the initial evaluation is to identify alarm features for gastroesophageal malignancy**
- **RO:symptomatic cholelithiasis**

Alarm features in dyspepsia

- **Unintentional weight loss**
- **Dysphagia**
- **Odynophagia**
- **Unexplained iron deficiency anemia**
- **Persistent vomiting**
- **Palpable mass or lymphadenopathy**
- **Family history of upper gastrointestinal cancer**

Physical examination

- **The physical examination in patients with dyspepsia is usually normal, except for epigastric tenderness**
- **RO:other diseases**
- **Carnett sign**

Laboratory tests

- **Routine blood counts and blood chemistry**
liver function tests
- **serum lipase, and amylase**
- **should be performed to identify patients with alarm features (eg, iron deficiency anemia) and underlying metabolic diseases that can cause dyspepsia (eg, diabetes, hypercalcemia)**

- *An approach to the evaluation of a patient with dyspepsia is outlined in the algorithm*





