

## GASTRITIS

### Important information regarding your health

Gastritis is a condition in which the stomach lining – known as the mucosa – is inflamed. Gastritis may be either acute or chronic. Sudden, severe inflammation of the stomach lining is called acute gastritis. Inflammation that lasts for a prolonged time is called chronic gastritis. If chronic gastritis is not treated, it may last for years or even a lifetime.

Gastritis can be caused by excessive alcohol use, chronic vomiting, stress, or the use of certain medications such as aspirin or other anti-inflammatory drugs. It can also be caused by a bacterium called *Helicobacter pylori* (*H. pylori*). *H. pylori* infection is the most common cause of chronic, nonerosive gastritis. Although not definitively known, the *H. pylori* bacterium is thought to be primarily transmitted from person to person, in areas with poor sanitation. It may be transmitted through contaminated food or water.

Erosive gastritis is a type of gastritis that often does not cause significant inflammation but can wear away the stomach lining causing bleeding, erosion, or ulcers. Erosive gastritis may be either acute or chronic. The most common cause of erosive gastritis is prolonged use of non-steroidal anti-inflammatory drugs, such as aspirin and ibuprofen. Other agents that can cause erosive gastritis include alcohol, cocaine, and radiation.

### Common Symptoms:

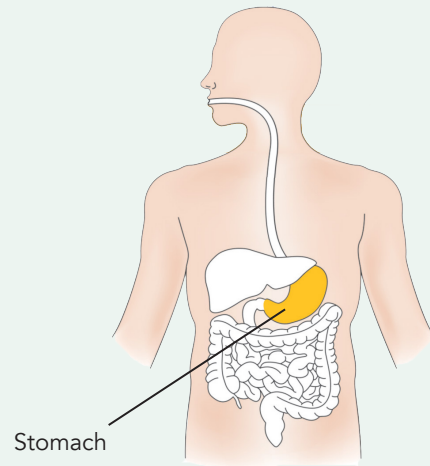
Many people with gastritis do not have any symptoms, but some people experience the following symptoms, called dyspepsia:

- Upper abdominal discomfort or pain
- Nausea
- Vomiting

Erosive gastritis may cause ulcers or erosions in the stomach lining that can bleed. Signs of bleeding in the stomach include the following:

- Blood in vomit
- Black stools
- Red blood in the stool

Most forms of chronic, nonspecific gastritis do not cause symptoms. However, chronic gastritis is a risk factor for peptic ulcer disease, gastric polyps, and benign and malignant gastric tumors.



### Diagnosis:

The most common diagnostic test for gastritis is an endoscopy with a biopsy of the stomach. An endoscope is used in order to examine the lining of the esophagus, stomach, and first portion of the small intestine. If necessary, a biopsy, which involves collecting tiny samples of tissue, will be performed. These biopsies are then microscopically examined by a pathologist - a physician who specializes in the diagnosis of disease via microscopic examination of the biopsies. The pathologist's diagnosis is key to determining the need for further treatment.

Other tests used to identify the cause of gastritis or any complications include the following:

- **Upper gastrointestinal (GI) series.** The patient swallows barium, a liquid contrast material that makes the digestive tract visible in an X-ray. X-ray images may show changes in the stomach lining, such as erosion or ulcers.
- **Blood test.** The doctor may check for anemia, a condition in which the blood's iron-rich substance, hemoglobin, is diminished. Anemia may be a sign of chronic bleeding in the stomach.
- **Stool test.** This test checks for the presence of blood in the stool, another sign of bleeding in the stomach.
- **Tests for *H. pylori* infection.** The doctor may test a patient's breath, blood, or stool for signs of infection. *H. pylori* infection can also be confirmed with biopsies taken from the stomach.



## For more information:

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**College of American Pathologists**  
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Please visit [www.cap.org](http://www.cap.org), from the cap home page, please click on **"Health and Wellness Resources for the Public"**. The following options will appear on the Resources for the Public page:

1. **Medical Test Information:** *Understanding cancer diagnoses: MyBiopsy.org Your Source for Information About Cancer Diagnosis*
2. **Your Health:** *Your health test reminder – Patients can put in personal data and will get reminder emails for important tests, screening colonoscopies, etc.*

*Information on disease diagnosis and prevention – A page developed by pathologists, doctors who specialize in prevention, early detection, and diagnosis of disease.*

## Treatment Options:

Medications that reduce the amount of acid in the stomach can relieve symptoms that may accompany gastritis and promote healing of the stomach lining. These medications include the following:

- Antacids, such as sodium bicarbonate, and citric acid (Alka-Seltzer); alumina and magnesia (Maalox); and calcium carbonate and magnesia (Rolaids).
- Histamine 2 (H2) blockers, such as famotidine (Pepcid AC) and ranitidine (Zantac 75). H2 blockers decrease acid production.
- Proton pump inhibitors (PPIs), such as omeprazole (Prilosec, Zegerid), lansoprazole (Prevacid), pantoprazole (Protonix), rabeprazole (Aciphex), esomeprazole (Nexium), and dexlansoprazole (Kapidex). PPIs decrease acid production more effectively than do H2 blockers.
- Treatment of *H. pylori* gastritis may include a common triple therapy that combines a PPI and two antibiotics – usually amoxicillin and clarithromycin – to kill the bacterium.

## Questions to Ask Your Healthcare Provider:

- What treatment option is best for me?
- What are the potential side effects?
- What are my risks?
- What dietary or lifestyle changes do you recommend?

## Physician Notes:

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