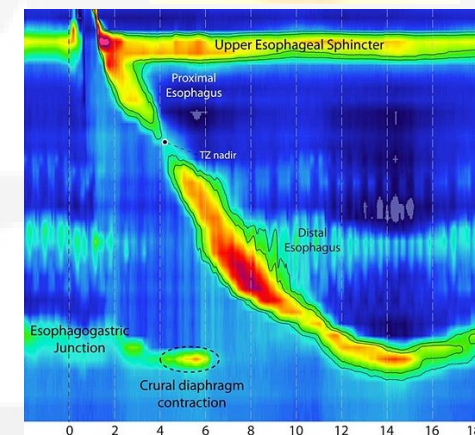
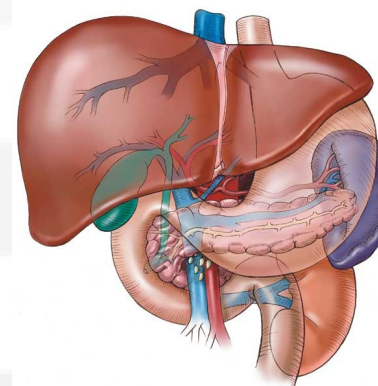
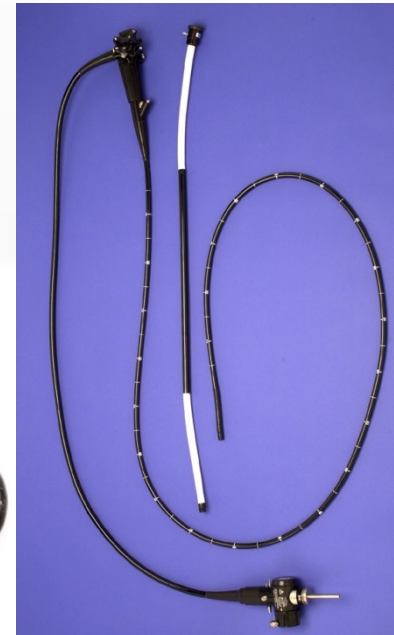


Dr David Rowbotham



Useful Titbits from the World of Gastroenterology

David Rowbotham

Clinical Director & Consultant Gastroenterologist
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So how do you become a good doctor?

“One finger in the throat and
one in the rectum makes a
good diagnostician”

Sir William Osler (1849 - 1919)

A successful doctor needs three things

“A top hat to give him authority,
a paunch to give him dignity,
and piles to give him an anxious
expression.”

Samuel Johnson (1709 - 1784)

Useful Titbits in Gastro

Oesophagus

- PPI's don't stop people refluxing
- Young dysphagia ?eosinophilic oesophagitis but many do improve with PPI
- Eradicating *H. pylori* can cause symptoms of GORD to get worse
- Oesophageal physiology (pH impedance) no need to stop PPI therapy

Useful Titbits in Gastro Stomach

- *H. pylori* serology doesn't tell you anything about whether patients have active infection
- All tests for eradication of *H. pylori* can be falsely negative (ABs; acid suppression)
- NSAIDs and PPI cover
- How to take PPIs for best effect

Useful Titbits in Gastro

Small bowel

- Coeliac serology (TTG / EMA)
- Why labs measure IgA too
- Complications of not sticking to gluten-free
- Wheat intolerance very common in IBS
- Causes of obscure GI bleeding:
 - <30 yr: Meckel's diverticulum
 - 30 – 50 yr: Small bowel tumour (GIST/carcinoid/Ca)
 - >50 yr: Angiodysplasia (AVM)

Useful Titbits in Gastro Colon

- What the colon is designed for ...
- Probiotics
- Lactulose often causes increased bloating
- Bulking laxatives best first line
- NZGG criteria for surveillance colonoscopy

[http://www.nzgg.org.nz/guidelines/0048/Colorectal_Summary_\(Web\).pdf](http://www.nzgg.org.nz/guidelines/0048/Colorectal_Summary_(Web).pdf)

Useful Titbits in Gastro

Pancreato-biliary

- Biliary colic is not colicky, it's constant pain
- SOD can mimic choledocholithiasis
- Steatorrhoea & pancreatic malabsorption?

Useful Titbits in Gastro IBD

- Probiotics
- Mesalazine daily dose 4g or greater
- Additional topical 5-ASA use if required
- Dysplasia and CRC risk
- Current guidelines for surveillance colonoscopy in IBD

Useful Titbits in Gastro

IBD and Pregnancy

- Probiotics **SAFE**
- 5-ASA **SAFE**
- Azathioprine/6MP **SAFE**
- Corticosteroids Safe ... ish

Useful Titbits in Gastro

IBS

- Probiotics
- No longer a diagnosis of exclusion
- Common precipitants
- Rome III classification:
 - IBS-C, IBS-D, IBS-M, IBS-U

Useful Titbits in Gastro

Clostridium difficile

- *Clostridium difficile*-associated diarrhoea
- Acute: Rx oral Metronidazole 2/52
- Relapse: Rx oral Vancomycin 2/52
+/- Rx oral Metronidazole 2/52
- Chronic relapsing:
 - Stop PPI (OR up to 6-8)
 - *Saccharomyces*
 - Probiotic
 - “Bacteriotherapy”

The only comprehensive digestive disease centre in Auckland

Consultations in a team environment

5 Gastroenterologists

1 Hepatologist

2 Upper GI & 1 Colorectal Surgeons

Dietitian

Health Psychologist

Clinical Nurse Specialists



The only place with full diagnostic and therapeutic services

Full endoscopy services

Capsule endoscopy

High resolution Impedance Manometry

24 hr pH/Impedance

BRAVO

CT colonography

Case 1

18 year old female presents with rectal bleeding and mucus, with feelings of incomplete evacuation. Rigid sigmoidoscopy reveals active proctitis with normal mucosa above the rectum. The best initial management is ...

- A. Oral steroids
- B. Azathioprine
- C. 5-ASA enema
- D. 5-ASA suppository
- E. Rectal swab

Case 2

18 year old male presents with rectal bleeding and mucus, with feelings of incomplete evacuation. Rigid sigmoidoscopy reveals active proctitis with normal mucosa above the rectum. The best initial management is ...

- A. Oral steroids
- B. Azathioprine
- C. 5-ASA enema
- D. 5-ASA suppository
- E. Rectal swab

Case 3

65 year old man with Crohn's pancolitis. Stable for years on Pentasa 500mg bd, but now presents to your surgery with gradual deterioration in symptoms with diarrhoea, blood and mucus. Do you ...

- A. Add in regular 5-ASA enemas
- B. Increase dose of oral 5-ASA
- C. Add in Azathioprine
- D. Commence course of oral steroids
- E. Give course of antibiotics

Case 4

30 year old woman with UC (left sided). Diagnosed 2 years ago. Difficult to settle colitis initially, but now stable on 5-ASA and Azathioprine. She arrives at your surgery and reveals she is 7 weeks pregnant. Do you ...

- A. Stop the 5-ASA
- B. Stop the Azathioprine
- C. Stop both
- D. Recommend termination
- E. Commence folic acid

Case 5

Regular intake of probiotics have been shown to ...

- A. Reduce the number of flare-ups of IBD
- B. Reduce IBS symptoms (eg: bloating)
- C. Reduce risk of *Clostridium difficile* diarrhoea
- D. All of the above
- E. None of the above

Case 6

Azathioprine/6-MP are ...

- A. Safe in pregnancy but not breastfeeding
- B. Safe in breastfeeding but not pregnancy
- C. Safe in both
- D. Unsafe in both
- E. Known teratogens