

Hanover Endoscopy Center

COMMON GASTROINTESTINAL PROBLEMS

A variety of problems could indicate the need for an outpatient screening at our center. Read more about each digestive disorder and gastrointestinal problem.

Colon Polyps and Cancer

A colon polyp is a growth of extra tissue in the lining of the bowel, colon or large intestine. While some can be cancerous, most are not. However, almost all colon cancer does begin as a polyp. Therefore, by removing polyps early the chances of it growing into colon cancer are eliminated.

People with a higher risk for developing polyps are anyone over age 50, those who have had polyps previously or those who have a family history of polyps or colon cancer.

Polyps generally do not cause symptoms. If a patient does have symptoms, they can include: blood in their underwear or on toilet paper after a bowel movement, blood in stool, or constipation or diarrhea that has lasted more than a week.

Most important, however, is that not having a family history of colon cancer, or symptoms, does not protect you. In fact, 75 percent of those who are diagnosed with colon cancer have no family history or symptoms.

If polyps are removed through a colonoscopy and performed on the schedule recommended by your physician, the chances of getting colon cancer are dramatically reduced. If precancerous colon polyps are removed, the chance of the polyp turning into cancer is eliminated. If colon cancer is detected early—well before symptoms occur—it is more than 90 percent curable. Depending on an individual's medical and family history, colonoscopies are typically recommended every one, three, five or 10 years.

Diverticulosis and Diverticulitis

Also called diverticular disease, diverticulosis happens when small pouches, called diverticula, bulge outward through the colon. This becomes more common as people get older, and about half of all people over age 60 have it. Physicians believe the main cause of this condition is a low-fiber diet.

Most people with diverticulosis don't have symptoms, but the condition can cause mild cramps, bloating or constipation. A high-fiber diet and medications to reduce colon spasm will often relieve these symptoms.

If the pouches become inflamed or infected, the condition is then called diverticulitis. The most common symptom is abdominal pain, usually on the left side. If the diverticula are infected, patients can also have fever, nausea, vomiting, chills, cramping or constipation. In serious cases, diverticulitis can lead to bleeding or blockages or even perforation (puncture) through the bowel wall. Treatment focuses on clearing up the infection with antibiotics, resting the colon and preventing future problems.

Hanover Endoscopy Center

Esophagitis and Stricture

Esophagitis is a general term for any inflammation, irritation or swelling of the esophagus, which is the tube that leads from the back of the mouth to the stomach. It is frequently caused by a backflow of stomach acid to the esophagus. This is commonly called “heartburn” or GERD (gastroesophageal reflux disease). Irritation may cause the tissues to become inflamed and occasionally form ulcers, and patients may have difficulty swallowing and have a burning sensation in the esophagus. Other symptoms include painful swallowing, heartburn or oral lesions. A stricture occurs when the inflamed area heals with a scar that narrows the esophagus, resulting in causing problems with swallowing. People who have frequent heartburn, vomit excessively, have had surgery or radiation to the chest or take medications like aspirin, ibuprofen and potassium are at a higher risk of developing strictures.

Benign esophageal stricture is a narrowing of the esophagus that can cause swallowing difficulties. It can be caused by gastroesophageal reflux (GER), certain medications, long-term use of a nasogastric tube that runs from the nose to the stomach, swallowing corrosive substances, or a bacterial or viral infection. Symptoms can include difficult or painful swallowing, unintentional weight loss or food regurgitation.

Crohn’s Disease

Crohn’s Disease is a chronic disorder that creates inflammation in the digestive tract (also known as the GI tract). It can affect any area from the mouth to the rectum, but most commonly affects the lower part of the small intestine. The disease causes inflammation and swelling deep into the affected area, causing pain that can make the intestines empty frequently, resulting in diarrhea.

Crohn’s Disease may be difficult to diagnose because the symptoms, including abdominal pain and diarrhea, are so similar to other intestinal disorders. Bleeding from the rectum, joint pain, weight loss and skin problems are other symptoms.

Ulcerative Colitis

Ulcerative colitis is an inflammatory bowel disease that causes inflammation and sores, called ulcers, in the lining of the rectum and colon. Ulcers form where inflammation has injured the cells that usually line the colon, which then may bleed and create pus. This inflammation also causes the colon to empty frequently, causing diarrhea.

Colitis can be difficult to diagnose because symptoms such as abdominal pain and diarrhea are so similar to other intestinal disorders. About half the people diagnosed with ulcerative colitis have mild symptoms. Others may suffer frequent fevers, bloody diarrhea, nausea and severe abdominal cramps. It may also cause problems such as arthritis, inflammation of the eye, liver disease and osteoporosis. It is not known why these problems occur outside the colon, but scientists think it may be the result of inflammation triggered by the immune system. Some of these problems go away when the colitis is treated.

Heartburn, Gastroesophageal Reflux (GER) and Gastroesophageal Reflux Disease (GERD)

Gastroesophageal Reflux Disease (GERD) is a more serious form of Gastroesophageal Reflux (GER), which is very common. GER occurs when the lower esophageal sphincter (LES) opens spontaneously for different periods of time or does not close properly, and the contents of the stomach rise up into the esophagus. GER is also called acid reflux or acid regurgitation because digestive acids rise up with the food.

Hanover Endoscopy Center

When reflux occurs, people can have indigestion where they can even taste food or fluid in the back of the mouth. Also, when the acid touches the lining of the esophagus it can cause heartburn, a burning sensation in the chest or throat. Frequent GER should be investigated by a gastroenterologist.

Barrett's Esophagus

Barrett's Esophagus is a condition in which the esophagus, the tube that carries food and saliva from the mouth to the stomach, changes so that some of its lining is replaced by a tissue type similar to that normally found in the intestine. This is called intestinal metaplasia.

This condition may be associated with having heartburn, but it may cause no symptoms on its own. A small number of people with the condition develop cancer of the esophagus, so it is important to be diagnosed so appropriate care can be started. Barrett's Esophagus is relatively common, particularly in people with frequent heartburn and gastroesophageal reflux disease (GERD).

Helicobacter Pylori (Stomach Infection)

Helicobacter Pylori (*H. pylori*) is a type of bacterium that causes inflammation of the stomach, chronic gastritis, and ulcers in the stomach or small intestine. People with *H. pylori* infections may be more likely to develop cancer in the stomach, including mucosa-associated lymphoid tissue (MALT) lymphoma. The bacteria weakens the protective coating of the stomach and first part of the small intestine, allowing digestive juices to irritate the sensitive lining.

If someone is a carrier of *H. pylori*, they may have no symptoms. However, if a patient has an ulcer or gastritis, they may experience abdominal pain, indigestion, bloating, mild nausea, belching and regurgitation or feel very hungry one to three hours after eating. *H. pylori* is treatable with antibiotics, proton pump inhibitors and histamine H2 blockers. Once the bacteria are completely gone from the body, the chance of its return is low.

Irritable Bowel Syndrome (IBS)

Irritable Bowel Syndrome (IBS) affects the large intestine and can cause bloating, abdominal cramping and a change in bowel habits. Some patients with IBS have constipation while others have diarrhea. Some people go back and forth between the two. Though IBS is uncomfortable, it does not harm the intestines. IBS is common and more frequently affects women than men. No one knows the exact cause of IBS, but most people can control symptoms with a change in diet, medicine and stress management.

Inflammatory Bowel Disease (IBD)

Inflammatory Bowel Disease (IBD) is an ongoing problem that causes inflammation and swelling in the digestive tract. The irritation causes bleeding sores, known as ulcers, to form along the digestive tract. Symptoms include abdominal pain and cramping as well as bloody diarrhea.

The two main types of IBD are ulcerative colitis and Crohn's Disease.

Hanover Endoscopy Center

Peptic Ulcer Disease (PUD)

A peptic ulcer is a sore in the lining of the stomach or first part of the small intestine. Burning stomach pain is the most common symptom and may come and go for a few days or few weeks. It is more bothersome when the stomach is empty and usually recedes after the patient eats.

Peptic ulcers occur when the acids that help food digestion damage the walls of the stomach or small intestine. The cause is unknown but ulcers may be associated with infection from *Helicobacter Pylori*. [Click here to read more about H. Pylori.](#)

Another cause of PUD is long-term use of anti-inflammatory medicines like aspirin and ibuprofen. And contrary to popular belief, while stress and spicy foods can aggravate ulcers, they do not cause them. If not treated, the ulcers may get worse. Treatment can include medicines that block stomach acids or antibiotics to kill bacteria. Surgery may be necessary for ulcers that do not heal.