

Hemorrhagic Gastropathy



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Received 6 July 2012; Revision submitted 6 July 2012; Accepted 8 July 2012

Abstract

Hemorrhagic gastropathy is the term used to describe multifocal gastric mucosal hemorrhage. The most frequently observed causes for this condition are the use of nonsteroidal anti-inflammatory drugs and the ingestion of large amounts of alcohol. In addition to patients exposed to these chemical causes, hemorrhagic gastropathy can also be observed in the critically ill. This article is part of an expert video encyclopedia.

Keywords

Hemorrhagic gastropathy; Nonsteroidal anti-inflammatory drugs; Standard endoscopy; Upper gastrointestinal bleeding; Video.

Video Related to this Article

Video available to view or download at doi:10.1016/S2212-0971(13)70077-3

Technique

Esophagogastroduodenoscopy.

Material

Endoscope: EG-201FP; Fujinon, Saitama, Japan.

Background and Endoscopic Procedures

The term hemorrhagic gastropathy is most often used to describe multifocal, superficial mucosal hemorrhage and mucosal erosions in the absence of clear peptic ulcer disease. The most frequently observed causes for hemorrhagic gastropathy are the use of nonsteroidal anti-inflammatory drugs (NSAIDs) and the ingestion of large amounts of alcohol.¹ Other causes include cocaine abuse and the use of oral iron supplements and oral potassium chloride.

A completely different cause for hemorrhagic gastropathy other than chemical agents is severe physical stress, which can be observed in patients admitted to the intensive care unit after major trauma or in severe sepsis.²

Microscopically, there is usually no significant inflammatory infiltrate, and therefore the term gastropathy is preferred over the term gastritis.¹ The differential diagnosis of hemorrhagic gastropathy includes radiation-induced mucosal damage, viral gastritis, and *Helicobacter pylori* infection. Treatment is supportive and aimed at eliminating the underlying cause. Additionally, proton pump inhibitors are frequently

used to facilitate mucosal healing as well as to prevent recurrence.

Because the chronic lower back pain did not allow for withdrawal of the NSAIDs a proton pump inhibitor was prescribed. Within weeks his hemoglobin level normalized. No repeat gastroscopy was performed.

Key Learning Points/Tips and Tricks

- Hemorrhagic gastropathy is a rare cause for gastrointestinal bleeding.
- The most prevalent causes of hemorrhagic gastropathy are NSAID use and alcohol abuse.
- In general, endoscopic therapeutic intervention is neither possible nor required.

Complications and Risk Factors

Because hemorrhagic gastropathy is often related to the use of NSAIDs, peptic ulcers, especially in the duodenal bulb, should not be overlooked.

Alternatives

There are no diagnostic alternatives to upper gastrointestinal endoscopy for the diagnosis of hemorrhagic gastritis.

Scripted Voiceover

Time (min:sec)	Voiceover text
00:00	A 52-year-old male patient underwent esophagogastroduodenoscopy to investigate iron-deficiency anemia and a positive fecal occult blood test.
00:15	Previous ileocolonoscopy was normal.

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- 00:19 The patient was on chronic NSAID therapy for chronic lower back pain, without using a proton pump inhibitor.
- 00:30 Gastroscopy showed streaks of hematinized blood, both in the body and the antrum of the stomach, without clear ulceration.
- 00:41 The duodenal bulb appeared normal.
- 00:47 Areas of patchy and slightly elevated erythema could be observed.
- 00:57 Additionally, the mucosa was quite friable.
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References

1. Chamberlain, C. E. Acute Hemorrhagic Gastritis. *Gastroenterol. Clin. North Am.* **1993**, 22, 843–873.
2. Washington, M. K.; Peek, R. M. Gastritis and Gastropathy. In *Textbook of Gastroenterology*; Yamada, T. Ed.; Wiley-Blackwell: Chisester, **2009**, 5th ed.; pp 1005–1025.