Digestive Disorders

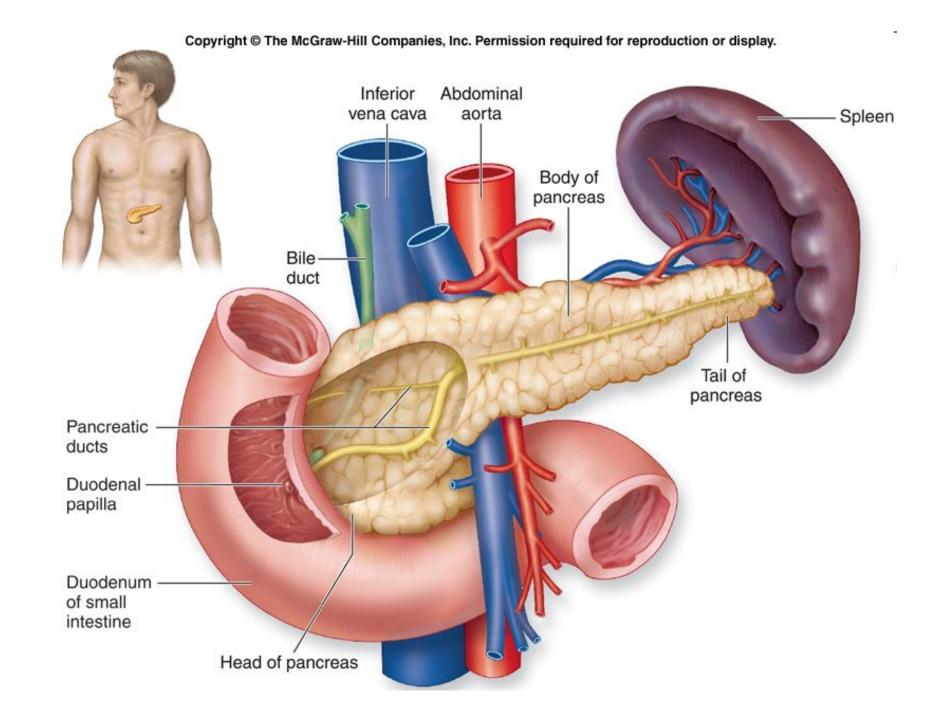
Lesson 2

Constipation

- Infrequent bowel movements
- Stools are dry, small and difficult to eliminate
- Can be caused by
 - inadequate water intake
 - Low fibre intake (what is fibre?)
 - Lack of physical activity

Disorders of Accessory Organs

- Hepatitis A, B and C: inflammation of liver
 - Caused by 3 different viruses
 - Hepatitis A: drinking water (vaccine)
 - Hepatitis B: sexual contact (vaccine)
 - Hepatitis C: sexual contact (no vaccine)
- Cirrhosis: Chronic liver condition, where scar tissue replaces healthy tissue
 - Chronic alcoholism
 - Hepatitis C



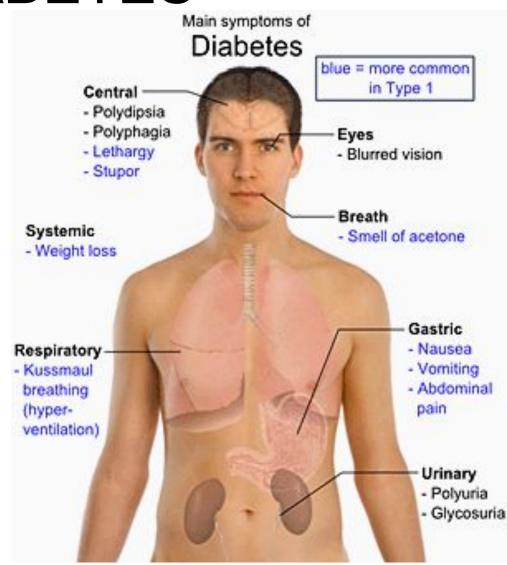
Insulin

- Released in response to elevated blood glucose
- Causes cells to become permeable to glucose
- Stimulates storage of glucose in the muscle, liver, and fat cells
 - -Stored as glycogen in the muscle and liver
 - -Stored as triglycerides in fat
- Glucose uptake by cells decreases concentrations in the blood

DIABETES

 Cells are unable to use glucose for energy

 It can cause blindness, kidney failure, nerve damage, and limb amputation



Type 1 Diabetes

 Also called juvenile diabetes and insulin-dependent diabetes

 Immune system produces antibodies that attack and destroy beta cells

Must have daily insulin injections to live

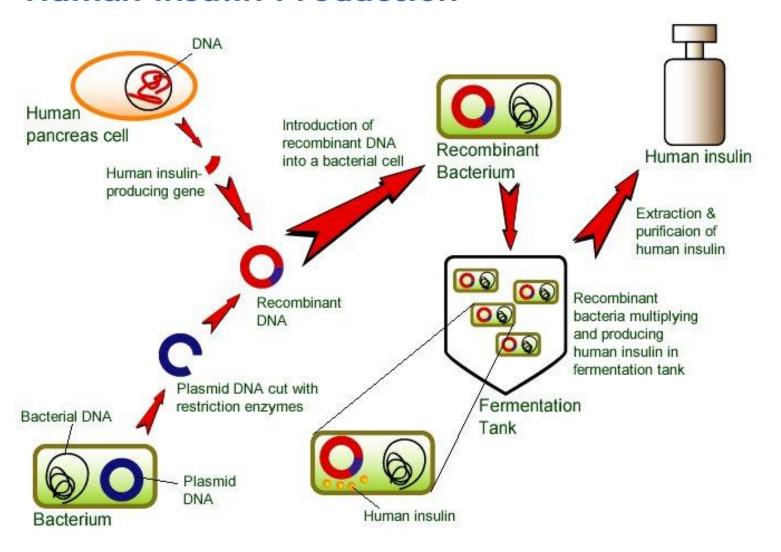
Type 2 Diabetes

- Tends to develop gradually from either:
 - Insulin receptors stop responding to insulin
 - Beta cells of pancreas produce less and less insulin over time
- Risk factors
 - Overweight
 - Diet high in refined carbohydrates
 - Belonging to certain ethno-cultural groups (Aboriginal, Hispanic)

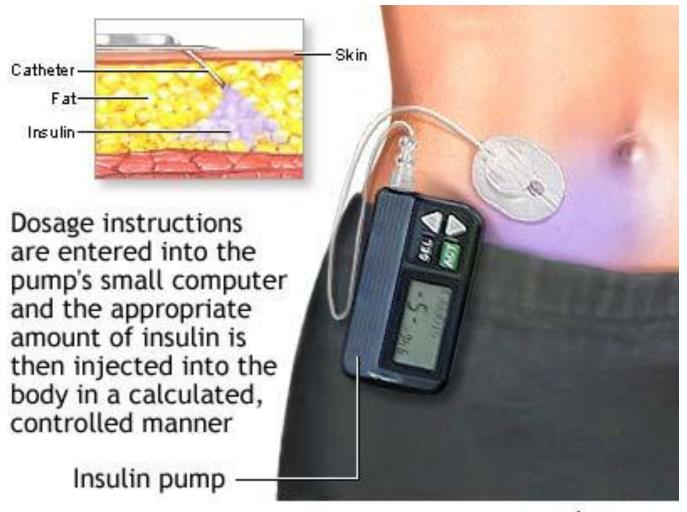
1922 Banting and Best

http://www.youtube.com/watch?v=53pxYZW71H4

Human Insulin Production



Timing Insulin Delivery

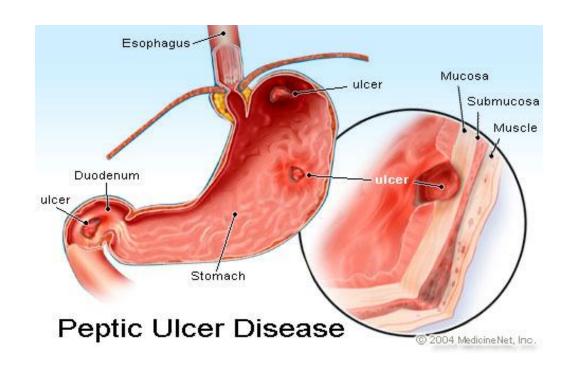




Peptic Ulcers

• **Description:** a **sore** in the lining of the stomach or duodenum, where hydrochloric acid and pepsin are present. The unprotected tissue comes into contact with acidic gastric juice.

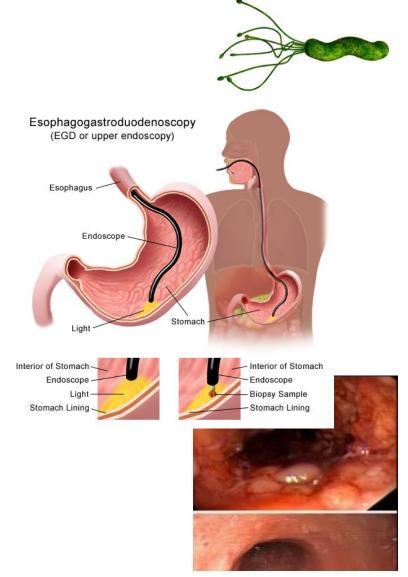
 Symptoms: abdominal pain, bloating, nausea, and loss of appetite.



Peptic Ulcer

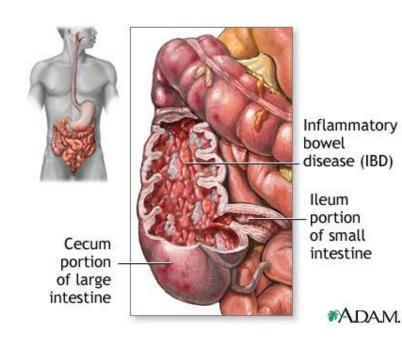
• Causes: an acid-resistant bacterium, Helicobacter pylori, attach themselves to the wall of the digestive tract and prevent that area from producing the protective mucus.

• Treatments: antibiotics that kill the bacteria, and medications that reduce acidity in the stomach.



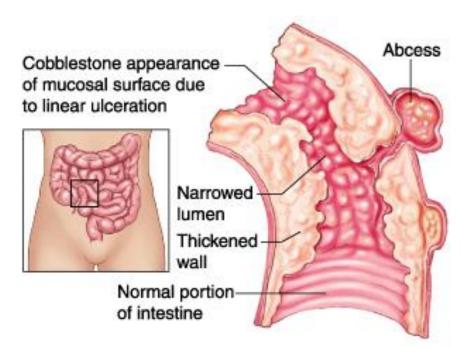
Inflammatory Bowel Disease

- A general name for a group of diseases that cause inflammation in the intestines.
- Prevalence is increasing in Canada over 200 000 people (1 in 160)
- Is a chronic disease, meaning that it is long lasting or recurrent.
- Can only be treated not cured - by a special diet and by taking medication to reduce pain and inflammation



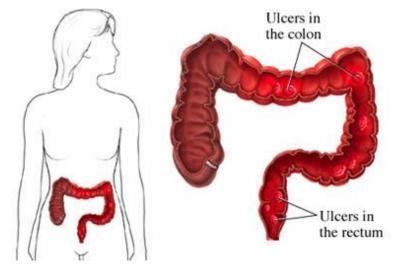
Crohn's Disease

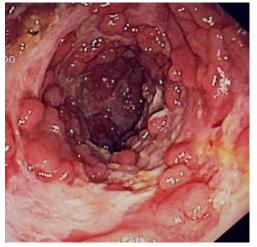
- Can affect any part of the alimentary canal from the mouth to the anus.
- Children with Crohn's disease develop thinner bones that increase the future risk of fractures, and they experience poor muscle development.



Ulcerative Colitis

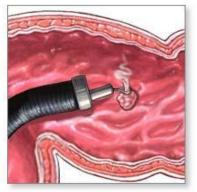
- Attacks the colon.
- Symptoms include loose and bloody stools, cramps, and abdominal pain.
- In severe cases it may be necessary for surgeons to remove the affected part of the colon and create a new external opening for digestive waste.



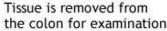


Colon Cancer

- Description:
 cancerous cells
 (tumours) are present
 in the wall of the large
 intestine (colon).
- Causes: A mix of genetic and environmental factors can cause cells in the lining of the bowel to turn cancerous.



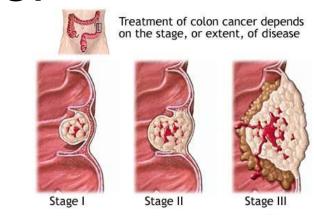


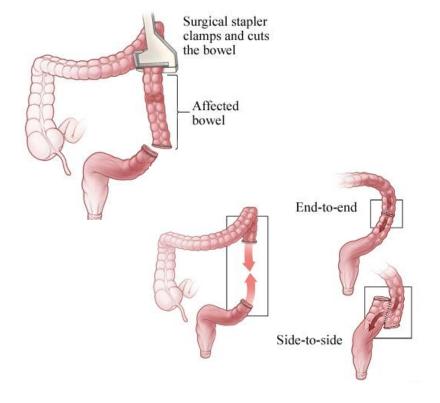




Colon Cancer

- Symptoms: The passage of bright red blood in the stool or a change in the frequency, consistency or thickness of stool are the most typical symptoms.
- Treatment: resection surgery where the diseased segment is removed and the bowel on either side of the cancer is reunited.

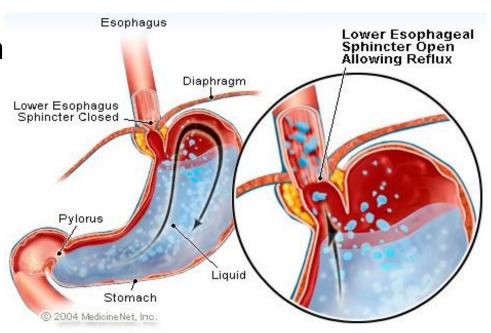




GERD

- Gastroesophageal reflux disease (GERD) is a disorder affecting the **lower esophageal sphincter**.
- Reflux refers to a reverse flow of the stomach's contents into the esophagus.

 Most people living with GERD suffer from indigestion heartburn or acid reflux.



GERD

- Lifestyle and dietary changes to reduce the reflux and the potential to damage the esophageal lining.
- Medical treatment involves the use of antacids to neutralize acid in the esophagus and stomach or drugs to reduce the amount of acid secreted into the stomach in response to meals.
- In serious cases surgery to tighten the esophogeal sphincter may be necessary



Learning Check

- Pg 422, Q 19-24
- Read Appendix article Pg 426, Q1